

ASPIRES Family Care

Family Resilience (FARE) Project

Endline Quantitative Findings Report

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EXECUTIVE SUMMARY

Background

The Family Resilience (FARE) project was funded by USAID’s Vulnerable Children Fund, implemented by AVSI and Retrak, and managed by FHI 360 through the ASPIRES Family Care project. FARE was developed to help build the evidence base on how to appropriately match economic strengthening (ES) activities with families at risk of family-child separation and with families in the process of reintegrating a previously separated child. It was implemented in two districts in Uganda from January 2016 through March 2018, with most activities beginning in September 2016. FARE was based on a theory of change that a combination of case management, social support and household economic and livelihood strengthening would stabilize highly vulnerable households to facilitate the return of separated children to family care and prevent future family disintegration. The project offered a range of ES and family strengthening services to increase family stability and reduce the likelihood of future separation/re-separation.

ES activities included savings groups (**VSLA**); cash transfer (**CT**) or cash transfer plus savings group (**CT + VSLA**) for a limited number of destitute households; community skills building (**Community Skills**) for geographically dispersed families;¹ ad hoc support for school fees or materials or apprenticeship only (**Other ES**) for those households that did not participate in a primary ES activity offered; and nothing (**No ES**) for those households that could not access or chose not to participate in any economic strengthening activities. In addition to these ES activities, all households received family strengthening activities including, at a minimum, home visiting and counselling by project social workers, and for many, training on parenting skills for caregivers, training on life skills and interactive dialogues for adolescents, community dialogues on topics of interest, and/or recreational activities aimed at promoting psychosocial well-being and fostering a sense of community. Across all activities, FARE found variable interest and availability of participating households; some families engaged in all activities and participated throughout the life of the project, while others chose more limited and/or sporadic participation.

The FARE project offered an opportunity for learning about how to provide these services and how well they worked. This report focuses on the latter and summarizes changes in key indicators related to family-child separation over the course of the project.

Methods

The longitudinal quantitative data on which this report is based were collected by FARE project case managers from beneficiary households before ES activities began (baseline, n=350 at-risk and n=255 reintegrating households) and again at the conclusion of the project, after 12-18 months of project activities (endline, n=292 at-risk and n=188 reintegrating households). Descriptive statistics were generated for more than 20 outcome variables that were selected from across the domains of economic well-being, social/family well-being, and child protection, at both time points. Changes in the average or distribution of responses were calculated and tests of statistical significance were performed, as appropriate. The data are disaggregated according to separation status (at-risk or reintegrating) and the primary economic strengthening activity the household participated in.

¹ FARE added community skills training—hands-on training in the production and sale of household items such as soap, student copy books, and paper bags—late in the program to allow families that had not benefitted from other ES interventions to participate in some form of ES.

Findings

Overall, the urban households at risk of family-child separation that participated in FARE recorded reduced economic vulnerability, as indicated by increases in:

- median household income (from roughly USD 24 to USD 42);
- the proportion of households able to consistently pay for basic needs (48% to 65%);
- the proportion of households typically eating two meals per day (47% to 72%); and
- the proportion of households with adequate shelter for their families (59% to 74%).

For at-risk households that participated in group savings (VSLA), reductions in economic vulnerability were accompanied by reductions in the proportion of households with out-of-school youth, reductions in reported child protection issues and use of harsh discipline practices, and improvements in caregiver access to emotional and material support. The observed rate of child separations at endline among all at-risk households was 3% (10 separations recorded across 292 households at endline), compared to a baseline rate of 7%. At 2%, the endline separation rate for households that participated in VSLA was slightly less than the overall average.

The most economically vulnerable (destitute) at-risk households received business skills training and a limited, unconditional cash transfer; they could also choose to participate in a VSLA. At baseline, the 36 CT+VSLA households included more children (average 5), were less able to pay for basic needs and education, and had lower shelter status compared to the other at-risk groups. These families recorded improvements on economic vulnerability measures like median household income (USD 17 to USD 35) and ability to pay for basic needs (25% to 44%), though the relative vulnerability of these households persisted. Further, among this more vulnerable group, improvements to children's regular school attendance were limited, and the child separation rate, at 14% (5 of 36 households), was seven times higher than that of the less vulnerable households. A comparison of baseline characteristics of households that did and did not experience a child separation at endline identified statistically significant differences (at $p \leq 0.05$) in the education level of the head of household, family shelter status, and availability of caregiver emotional support. Generally, separated households recorded lower levels of education, shelter, and emotional support than households that did not report a child separation.

The reintegrating households enrolled in FARE were more diverse than the at-risk households, in terms of their locations, range and types of vulnerability, and the economic strengthening activities offered to them. Notably, half of this sample was not able to access or chose not to participate in any economic strengthening activities. Overall, the reintegrating households compared to prevention households recorded relatively higher incomes at baseline coupled with relatively good shelter and food security, with only modest changes at endline in:

- median household income (from roughly USD 28 to USD 34);
- the proportion of households typically eating two meals per day (76% to 80%); and
- the proportion of households with adequate shelter for their families (75% to 80%).

Despite relatively less economic vulnerability than prevention households, the households in the aggregate reintegration sample recorded a lower proportion of households able to consistently pay for basic needs, at both baseline and endline (28% to 44%). Fewer reintegrating households reported having no children regularly attending school at endline, but the proportion of households with all children regularly attending school remained fairly low and fell slightly. For example, at endline, only 25% and 30% of Cash Transfer and Community Skills households, respectively, reported that all children were attending school regularly, compared with 26% and 36% at baseline. Reintegrating households also reported varied changes in the presence of child protection concerns and harsh discipline practices, with some improvements and some areas

of concern across sub-groups. For example, the proportion of households reporting neglect rose slightly among Cash Transfer, Other ES, and No ES groups, while Cash Transfer and Community Skills groups reported slight increases in child labor. The average separation rate across reintegrating families at endline was high (16%) relative to at-risk households, highest among households that did not receive/participate in economic strengthening activities (18%) and lowest among Other ES recipient households (12%). Across the reintegration sample, households that experienced a separation had statistically significantly (at $p \leq .05$) different baseline values for education level of the head of household and level of regular school attendance by children in the household. Households that experienced a separation had generally lower values for both of these indicators.

Discussion

Limitations of the research design preclude us from assigning attribution of specific outcomes to specific activities, and for several categories of activity the sample size is small (particularly within the reintegration sample), but trends observed in the data suggest opportunities and challenges for future programming. For families at risk of separation, the observed changes in economic vulnerability, well-being indicators, and child protection concerns were all in directions supportive of family unity. The persistent differences in economic indicators observed between the most vulnerable (destitute) CT+VSLA families and the vulnerable VSLA-only families may help to explain the higher rate of separation observed among destitute families and may suggest that a longer period of implementation and/or specific support for school fees may be important for further stabilizing the most destitute urban households. Additionally, adult alcohol use in front of children persisted among a high percentage of households at endline, indicating an area for programming emphasis and development.

Among reintegrating households, relatively lower baseline economic vulnerability and stability of economic indicators over time suggest that economic vulnerability may not have been the primary driver of separation for these families. Underscoring this, issues with child labor, neglect, and physical abuse persisted among reintegrating families, as did fairly low levels of regular school attendance. While reintegrating households that participated in combined family strengthening and economic strengthening activities did record modest improvements in many areas of concern for family-child separation, urban families with a child reunified from the streets or remand may require more substantial case management and family strengthening follow-up, with economic strengthening activities playing a supportive and/or secondary role to more robust or comprehensive parenting and life skills activities. For the first half of the project, reintegrating families received fewer home visits by social workers than were prescribed in the project guidelines and experienced time lags in accessing other program activities, which may have contributed to some of these outcomes.

Findings from FARE reinforce the necessity of understanding the family and social context of separation risk to identify whether and which economic strengthening activities may best address a family's immediate and longer-term needs in support of keeping children in family care.

INTRODUCTION

The Accelerating Strategies for Practical Innovation & Research in Economic Strengthening (ASPIRES) project, funded by PEPFAR and USAID and managed by FHI 360, was designed to support gender-sensitive programming, research and learning to improve the economic security of highly vulnerable individuals, families and children. The ASPIRES mandate included designing and implementing rigorous research to evaluate programs and inform a new understanding of best practices in economic strengthening (ES) for vulnerable populations.

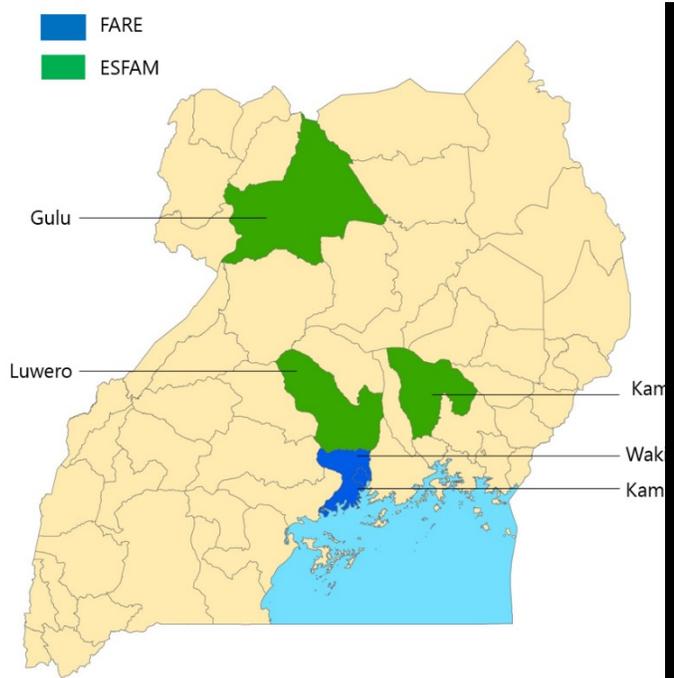
With support from USAID's Vulnerable Children Fund (formerly Displaced Children and Orphans Fund - DCOF), ASPIRES' Family Care project focused on how ES interventions can help children remain in family care rather than separating to residential care facilities, living on the street, or migrating for work. Keeping families together reduces children's risk of neglect, abuse and exploitation and increases the likelihood that they will experience positive physical and mental health outcomes.

Through Family Care, ASPIRES sponsored two learning projects in Uganda intended to reach economically and socially vulnerable families at risk of separation or whose previously separated children were returning to family care. The Family Resilience (FARE) and Economic Strengthening to Keep and Reintegrate Children in Family Care (ESFAM) projects offered a range of services to increase family stability and reduce the likelihood of future separation or re-separation. Both projects were based on the theory that a combination of case management, social support and household economic and livelihood strengthening would stabilize highly vulnerable households, facilitating the return of separated children to family care and preventing future family disintegration. In addition to supporting families, the projects offered an opportunity for learning about how to provide these services, how families experienced them and how well they worked.

FARE Project Background

The Family Resilience (FARE) learning project was led by AVSI Foundation in collaboration with Retrak and in association with two local NGO partners. FARE was implemented in the urban and peri-urban areas of Kampala Capital City and Wakiso District.

FARE at-risk-of-separation families were located in Central and Makindye divisions of Kampala Capital City and in Nabweru and Ndejje subcounties of Wakiso District. FARE selected the targeted divisions/sub-counties in Year 1 of the project based on data provided by the project partners and the Ugandan government's Kampiringisa National Rehabilitation Centre that suggested these areas had higher levels of family-child separation than others. In these divisions/sub-counties, FARE selected a total of nine parishes in which to identify project beneficiary families at risk of separation and implement prevention of family-child separation programming, based on the recommendation of the local Community Development Officers (CDOs), district and sub-county leadership,



police, and available partner data (there was no official data on incidence of family-child separation in the parishes). FARE worked across the districts of Kampala and Wakiso to support reintegrating families.

The project had planned to reach 350 households at risk of separation and support 300 reunified children and their families. The identification of families at risk of separation for inclusion in FARE was based on a process that involved initial identification and pre-screening against specific vulnerability criteria by members of Local Councils. These criteria were drawn from a Government of Uganda pre-screening tool used in orphans and vulnerable children (OVC) programming, with additional indicators thought to be associated with risk of family-child separation. In a second step, FARE staff further screened and verified families' eligibility using a brief Household Vulnerability Prioritization Tool, again adapted by the project from a Government of Uganda tool to include additional information thought to be associated with risk of family-child separation. The project thus identified 350 at-risk families in four target sub-counties/divisions.

The process for identifying separated children who might be reunified with their families involved several coordinating partners, namely Naguru Remand Home, Companionship of Workers Association (COWA), three Retrak centers, and the Fruits of Charity Foundation (FCF) center. FARE also received referrals of separated children by police or para-social workers. FARE's three implementing partners (Retrak, COWA, FCF) had direct access to these children on a daily basis by virtue of their work and this helped to identify those who were eligible: children below 18 years from Kampala or Wakiso who had separated from their families and were interested in returning to family care. Children who met these criteria were taken into care, assessed using the Child Needs Assessment Tool, and supported to create a Child Development Plan. Ultimately, FARE reunified and enrolled into the project 268 children from 255 families across 19 sub-counties in the two target districts.²

Theory of change and FARE activities

The FARE project theory of change was based on an understanding, from practice wisdom and the literature, that a combination of economic, social, and structural issues contribute to family-child separation, in ways that likely differ for every family. Interventions, therefore, should be aligned to the specific needs of a household. The theory of change posited that tailored ES activities along with case management-based family strengthening activities should reduce drivers of separation and make families more resilient, which would reduce child separation and support child reintegration (see Annex 1 for greater detail).

In accordance with this theory of change, once enrolled in the project, all families were connected with a community-based para-social worker who conducted case management activities, including assessment of family well-being and needs, development of household plans, and monthly or quarterly family visits/monitoring. All households also participated in a formal baseline data collection process that helped to identify the most economically vulnerable (described in Methods).

² Further description of the household identification, screening, and enrolment process is available in the FARE Project final report.

METHODS

In support of ASPIRES' objective to assess the effects of different types of economic strengthening activities integrated with family strengthening activities among targeted families, the Family Care project designed a mixed method evaluation to be implemented alongside programming.³ Because ES activities should be matched to a household's situation and because of uncertainty about when and where households in the reintegration sample would be reunified, we were not able to randomly assign ES activities to households. As a result, to assess effectiveness of ES activities we examine descriptively, rather than measure, the beneficiary-level outcomes related to the project theory of change. The findings presented in this report are derived from the longitudinal descriptive quantitative data generated as part of the evaluation design.

Data collection & instruments

FARE staff collected baseline data from at-risk households between July and September 2016. Baseline data for reintegrating households were collected on a rolling basis following reunification, between July 2016 and August 2017. Endline data were collected for all households in January to February 2018, following 12 – 18 months of activity implementation. At both timepoints, data were collected using the project's Household Vulnerability Assessment Tool (HVAT), the Uganda Progress out of Poverty Index (PPI), a Caregiver Integration Status Tool and a Child Integration Status Tool.

FARE's HVAT (Annex II) was adapted from the Uganda Ministry of Gender, Labour and Social Development's revised tool. The HVAT collects household background/demographic data and information about household members, along with information under six core program areas (CPA) prioritized in Uganda's National Strategic Programme Plan of Interventions-2 (NSPPI2) including economic strengthening; food security and nutrition; health, water, sanitation and shelter; education; psychosocial support and basic care; and child protection and legal support. In consultation with ASPIRES Family Care team members, FARE adapted the HVAT to include some additional questions related to household economic capacity, ability to deal with shocks, psychosocial well-being, and child protection. Responses to the HVAT are summed in composite scores within each domain. Economic indicators are presented in the local currency, UGX, with USD provided as reference, calculated at average exchange rate for the period of observation (July 2016 – January 2018) of 3,571 UGX = 1 USD.

The PPI (Annex III) is a validated, 10-item questionnaire that generates a score indicating the likelihood that a surveyed household falls below a given poverty line. The PPI for Uganda is based on Uganda's 2012/13 National Household Survey. ASPIRES Family Care requested its partners collect PPI data to help compare approaches to household economic categorization.

The Child Integration Status Tool (Annex IV) and Caregiver Integration Status Tool (Annex V) are related and were specifically designed to reflect domains of child well-being that the literature and practice wisdom identify as central drivers of family-child separation. Members of the Family Care team, with colleagues from the 4Children project and Retrak, evaluated several tools that look at child well-being, including the Developmental Assets Profile (DAP) and the Child Status Index (CSI), but none were perfectly suited for use in the Family Care context. Family Care and partners together selected relevant indicators from these and other tools, licensing several DAP items from the Search Institute. The Child Integration Status Tool includes six key domains: enjoyment of education; social well-being; parent-child attachment; community belonging;

³ A more detailed description of the overall research design is accessible [here](#).

Namey, E., Laumann, L.C., Brown, A.N. Learning about integrated development using longitudinal mixed methods programme evaluation. *IDS Bulletin* 49 (4). 2018.

emotional well-being; and safety; the Caregiver Integration Status Tool includes the same, with the exception of the enjoyment of education domain. These tools were intended to be used to facilitate case management and to serve as data collection instruments. The star diagram that followed the questions allowed case managers to plot progress on each domain and facilitate discussion of development plans with children and caregivers. FHI 360 assessed the measurement reliability and validity of the two tools using available baseline data from Family Care learning projects. Both the Child and Caregiver Integration Status Tools exhibited fairly strong measures of reliability (Cronbach’s alpha of 0.7 or higher) and construct validity (comparative fit index of 0.9 or higher for confirmatory factor analyses).

The HVAT and PPI data reflect the situation of the household, as reported by the head of household/primary caregiver, while the Integration Status tools profile the primary caregiver and a specific index child, either the one determined to be at highest risk of separation in the family or the reunified child.

Economic classification of households for assignment to project activities

To pair households with appropriate economic strengthening activities, ESFAM drew on PEPFAR guidance⁴ and the LIFT Project’s conceptual framework for economic vulnerability.⁵ FARE’s strategies for addressing economic vulnerability were to:

- Stabilize household consumption of selected destitute families through provision of cash transfer (CT).
- Increase household assets and access to resources by forming, training, and supporting VSLA groups with participating families.
- Increase participant household earning potential by building skills related to financial literacy and enterprise selection, planning and management, as well as community skills.
- Build vocational and life skills for adolescents to increase their job entry through apprenticeships.

Table 1. Activities included in FARE’s economic strengthening strategy

Economic activity	Description
Cash transfers (CT)	Monthly transfer of UGX 70,000 (~USD 20) for six months via mobile money payment. Prior to receipt of CT, all households were trained in selection, planning, and management of enterprises. CT was followed by VSLA for many participants.
Savings groups (VSLA)	Village Savings and Loans Associations were formed around project families and included non-project community members. Most VSLA groups were also trained in microenterprise selection, planning, and management in the last quarter of the project. (Predominantly an option for at-risk families; the scattered nature of reintegrating households prevented making this option available to most of them.)
Community skills (Comm skills)	Community skills were short, practical hands-on trainings to promote production of marketable goods (bar soap, student copy books, paper bags, reusable sanitary pads, a local millet drink).
Other ES	Included apprenticeship training for youth, or ad hoc support to households for educational expenses in the absence of any of the activities above.

⁴ PEPFAR. 2012. Guidance for Orphans and Vulnerable Children Programming. Washington, DC: PEPFAR; Evans et al. 2013. Economic Strengthening for Children Resource Guide. Washington, D.C.: FHI 360.

⁵ Woller, Gary. 2011. LIFT Livelihood & Food Security Conceptual Framework. Washington, D.C.: FHI 360.

Based on their experience with the SCORE project, AVSI estimated that 10-15% of project beneficiaries would be classified as in need of consumption smoothing through direct cash transfers. However, analysis of the baseline PPI data indicated that over 40% of at-risk households were living on less than USD \$2 per day—more than the project could afford to support with the cash transfer intervention. The project therefore selected 80 families (13%) with the lowest PPI scores to receive the cash transfers. All other households were offered a selection of the other ES activities, as feasible given a household’s location and situation.

In addition to these ES activities, all households received family strengthening activities including, at a minimum, home visiting and counselling by project social workers, and for many, training on parenting skills for caregivers, training on life skills and interactive dialogues for adolescents, community dialogues on topics of interest, and/or recreational activities aimed at promoting psychosocial well-being and fostering a sense of community. Across all activities, FARE found variable interest and availability of participating households; some families engaged in all activities and participated throughout the life of the project, while others chose more limited and/or sporadic participation.

Data Analysis

Descriptive statistics were generated for selected indicators from the PPI, the Integration Status tools, and each of the core program areas of the HVAT. For each indicator, we present baseline and endline values in tabular or graphical form and highlight in the text any notable changes over time. To test for statistical significance, we used paired t-tests for continuous data and chi-squared tests (or Fisher’s exact tests as appropriate) for categorical variables. Results that are statistically significant at the $p \leq 0.05$ level with 95% confidence intervals are indicated with an asterisk (*).

The data are disaggregated according to the primary economic strengthening activity the household participated in: savings groups (**VSLA**); cash transfer (**CT**); cash transfer plus savings group (**CT + VSLA**); community training in income generating activity skills (**Comm Skills**); youth apprenticeship or other ES activity not standard to the group (**Other ES**); and those who did not receive/participate in any economic strengthening activities (**No ES**). Where categorical variables represent mutually-exclusive indicators of, for example, levels of risk, we have indicated in gray the response option/value that showed the greatest decline in proportion of respondents and have used yellow to indicate the variable showing the greatest increase in proportion of respondents, to provide a visual aid in interpreting how the disaggregated sample changed over time.

Note that in each data table, column headers indicate the number of households responding in the complete sample or sub-sample and the denominators used to calculate cell values have been adjusted accordingly. We have excluded from the data tables in the main findings section the households (n=6) in the at-risk sample that participated only in other ES activities (Other ES) since we cannot interpret the results in that column because of the small sample size. For the sake of data completeness, we do provide the “Other ES” data in Annex VI. There was also considerable loss to follow-up in the “No ES” households in the at-risk sample, (n=119 at baseline, n=65 at endline), which should be considered in interpretations. Tests of statistical significance were not performed on any disaggregated data with a sample size of 30 respondents or less (Community Skills and Other ES for the reintegrating household sample). Additionally, we were unable to run statistical significance tests on some variables given their construction; these are marked in the tables with a ^ symbol.

FINDINGS

Of the 350 families at risk of family-child separation enrolled in the FARE project at baseline, approximately 54 (15%) were lost to follow up at endline; all of these households belonged to the group that did not receive (or opted out of) economic strengthening activities. Among the reintegration households, approximately 16 (8%) of the 205 families were lost to follow up, also within the “No ES” category. Of note, in a few categories there were households added to the reintegration sample between baseline and endline.

Composition of FARE Beneficiary Households

The Background and Household Summary sections of the HVAT include questions that elicit basic information about each household and about the specific vulnerabilities of each child in the household. The sample of at-risk households, described in Table 2a, was relatively stable in terms of household characteristics over the period between baseline and endline. Overall, there were slight increases in the average number of children in the household and significantly more attending school from baseline to endline, and slight decreases in the number of orphans and the number of HIV+ children reported to be living in the household. Reintegration households (Table 2b) were also relatively stable and saw slight but significant increases in the average number of children per household, the average number of children enrolled in school, and the average number of children immunized from baseline to endline.

Table 2a. FARE at-risk HHs, Household composition

		Aggregate sample		VSLA		CT + VSLA		No ES	
		Base	End	Base	End	Base	End	Base	End
		(n=350)	(n=296)	(n=189)	(n=189)	(n=36)	(n=36)	(n=119)	(n=65)
Head of Household Age	Median	38	41	37	39	45.5	48	38	43
	Range	20-99	17-85	23-77	17-79	21-80	23-85	20-99	22-79
# of children in HH		4.2	4.3	4.2	4.2	5.0	5.4	3.8	4.3
# of children in school		2.7	3.1*	2.8	3.1*	2.9	3.3	2.4	3.1*
# of orphans		1.2	1.1	1.1	1.0	1.8	1.5	1.1	1.3
# of children disabled		0.1	0.1	0.1	0.1	0.2	0.2	0.1	0.1
# of children immunized		3.8	4.0	3.9	3.8	4.5	5.0	3.4	4.0*
# of children HIV+		0.7	0.2*	0.8	0.1*	0.8	0.3	0.5	0.2

Table 2b. FARE reintegrating HHs, Household composition

		Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
		Base	End	Base	End	Base	End	Base	End	Base	End
		(n=205)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=116)	(n=98)
Head of Household Age	Median	38	39	38	41	39	38	41	41	38	38
	Range	20-75	20-80	24-70	23-72	23-60	25-60	29-56	30-66	20-75	20-80
# of children in HH		3.4	4.0*	3.8	4.6*	3.5	3.7	4.1	5.1	3.2	3.6*
# of children in school		2.3	2.9*	2.4	3.3*	2.3	2.6	3	4.1	2.2	2.6*
# of orphans		0.5	0.6	0.4	0.7*	0.4	0.4	0.8	0.8	0.6	0.6
# of children disabled		0	0	0.1	0.2	0	0	0	0	0	0
# of children immunized		2.9	3.7*	3.1	4.4*	2.9	3.5	3.7	4.9	2.7	3.3*
# of children HIV+		0.1	0.1	0.1	0.1	0.1	0.1	0	0	0.1	0.1

Economic Well-being

Given the focus of the ASPIRES project, and the FARE project theory of change indicating economic vulnerability as a driver of family-child separation, we gathered multiple data points to assess the economic well-being of participating households. We present first the data on the overall economic classifications of households, from the HVAT and the PPI, and then look in more detail at a range of variables that comprise the core program areas that contribute to these economic classifications.

Economic Classification of Beneficiary Households

The FARE project used two methods to classify households based on their level of economic vulnerability: a tool developed by ASPIRES Family Care and PPI scores.

ASPIRES Family Care developed and piloted the Simple Economic Strengthening Tool (Simple Tool), that aimed to make a simple but objective determination about economic categorization of households based on characteristics of poverty using eight questions connected to four domains drawn from the literature (ability to pay for basic needs, income volatility, availability of liquid assets and savings, and food security). At first, this tool classified more households as destitute than FARE could serve; FARE then used PPI data to determine its cash transfer recipients and moved forward with program activities. ASPIRES subsequently revised the Simple Tool to see if it could be improved. The analyses below present a characterization of FARE households according to a revised version of the Simple Tool⁶ that can be used to assess whether the sample of households in the FARE project showed changes in their economic vulnerability over time.

Across the sample of at-risk households, the trend from baseline to endline was one of decreased economic vulnerability. Overall, the proportion of households in the destitute and struggling categories decreased significantly from baseline to endline, while gains were recorded in the prepared to grow and not vulnerable categories (Table 3a). When disaggregated by economic strengthening activity, these reductions in economic vulnerability are most apparent among the CT+VSLA category, with 94% of households classified as destitute or struggling at baseline, reduced to 58% at endline. The group of households that received No ES recorded trends fairly similar to the aggregate sample.

For the reintegration sample, by contrast, the overall trend was one of slightly increased economic vulnerability at endline (Table 3b). The proportion of households in the destitute and struggling categories increased from 55% at baseline to 59% at endline, despite a decrease in the proportion classified as destitute. These trends held across the categories of ES activities, except among those in the Other ES category where there was an increase in the proportion of households ready to grow or no longer vulnerable.

⁶ Initially, ASPIRES' economic categorization tool included nine questions from the HVAT and an additional question about asset acquisition. The Uganda PPI score card was used as a validation measure. Preliminary analysis of Simple Tool data from a group of FARE project households suggested that the classification system was too heavily weighted toward the destitution category (unhelpful for FARE's targeting needs). The preliminary analysis also showed a weak, positive correlation with PPI-generated poverty likelihoods calculated at the national poverty line, and poverty likelihoods themselves were disproportionately low compared to the perceived poverty levels of beneficiary households. ASPIRES recalibrated the tool by refining the scoring approach, revising (with field input) scores assigned to responses, removing a question on coping with shocks (too complex), and simplifying the weighting of scores. This, combined with calculating poverty likelihood at the \$2/day level, resulted in a moderate, positive correlation between the two tools, suggesting that the revised version was an improvement on the initial version.

Table 3a. FARE At-Risk HHs, economic classification using the Family Care Simple Tool

	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=296)	(n=189)	(n=189)	(n=36)	(n=36)	(n=119)	(n=65)
Destitute	27.7	8.1*	24.9	6.4*	58.3	16.7*	23.5	9.2*
Struggling	50.3	36.8*	50.3	32.8*	36.1	41.7*	52.9	46.2*
Prepared to grow	21.1	46.0*	23.8	48.2*	5.6	38.9*	22.7	41.5*
Not vulnerable	0.9	9.1*	1.1	12.7*	0	2.8*	0.8	3.1*

Table 3b. FARE Reintegration HHs, economic classification using the Family Care Simple Tool

	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=205)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=116)	(n=98)
Destitute	10.2	5.8*	15.9	6.8	10.3	6.7	6.3	11.8	8.6	4.1
Struggling	44.9	54.5	54.6	70.5	51.7	63.3	56.3	35.3	37.9	48
Prepared to grow	37.6	33.9	27.3	20.5	34.5	30	37.5	47.1	42.2	38.8
Not vulnerable	7.3	5.8	2.3	2.3	3.5	0	0	5.9	11.2	9.2

PPI data from each household provided a secondary source of economic vulnerability information that was used to help the project rank households that fell into the destitute category according to the Simple Tool. The PPI also allows us to generate poverty rates for a sample of households, given different poverty thresholds. At a poverty rate measured at the level of less than 2 USD per day in expenditures, about 44% of the FARE at-risk households were considered to be living in poverty at baseline; this was slightly reduced to 40% at endline (Table 4a). According to the PPI, a slightly greater proportion of households in the reintegrating sample (35%) would be considered as living in poverty at endline than at baseline (32%) (Table 4b).

Table 4a. FARE At-Risk, HH PPI poverty rates at various cutoffs

Poverty rate (%) at poverty threshold of:	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=296)	(n=189)	(n=189)	(n=36)	(n=36)	(n=119)	(n=65)
<\$2.00/day PPP	44.3	40.6*	41.2	38.4*	62.7	48.1*	43.5	41.8
<\$2.50/day PPP	58.8	55.2*	55.2	53.2	76	61.8*	58.3	56.6
<\$4.00/day PPP	81.3	79.3*	79.5	78	91.2	82.6*	81.2	80.4

Table 4b. FARE Reintegration, HH PPI poverty rates at various cutoffs

Poverty rate (%) at poverty threshold of:	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=205)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=116)	(n=98)
<\$2.00/day PPP	32.2	35.4	40.9	41.3	30.2	36.1	30.2	41.2	29.7	31.4
<\$2.50/day PPP	46.1	49.6	55.9	56	44	50.8	44	55.8	43.2	45.4
<\$4.00/day PPP	71.8	75.3	80.3	79.8	70.7	76.2	69.1	79.2	69.3	72.4

For both samples, we look in greater detail at the types of livelihood and economic changes in households that further characterize household economic vulnerability.

CPA 1 – Economic Strengthening

The FARE HVAT CPA 1 includes seven questions relating to who pays for household expenses, main source of household income, current monthly income, current savings, ownership of assets, ability to pay consistently for household expenses, and strategies a household might use to cope with expenses related to a possible shock/unexpected event. Below, we present the composite scores for FARE HVAT CPA 1, followed by data on variables selected as indicators of economic well-being that could be related to child separation: source of income, monthly income, ability to pay for recurrent monthly expenses, and likely strategies to cope financially with adverse events. Potential composite scores under this CPA range from 0 to 28, with higher scores reflecting greater vulnerability.

Among at-risk households, there was a statistically significant reduction of approximately 5 points or 30.2% in the average total CPA 1 score from baseline to endline, representing a reduction in economic vulnerability (Table 5a). Similar reductions in average CPA 1 score were recorded across each of the at-risk sub-samples.

Reintegrating households began with the same average total CPA 1 score at baseline and recorded a slightly smaller but still statistically significant reduction of 3.5 points at endline (Table 5b). The endline average scores for the three sub-samples that received ES activities were very similar, but still higher than the baseline score for the No ES category, which also saw a reduction in CPA 1 score.

Table 5a. FARE at-risk HHs, Summary of CPA 1 – Economic strengthening

Average score for CPA 1 (0-28, higher= more vulnerable)	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=296)	(n=189)	(n=189)	(n=36)	(n=36)	(n=119)	(n=65)
	16.2	11.3*	16	10.5*	19	12.4*	15.8	12.9*

Table 5b. FARE Reintegrating HHs, Summary of CPA 1 – Economic strengthening

Average score for CPA 1 (0-28, higher= more vulnerable)	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=205)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=116)	(n=98)
	16.1	14.7*	17.5	15.8*	16.9	15.4	16.6	15.4	15.2	14.2*

Main Source of Income

The HVAT asked respondents to identify their main source of income from a list of nine options scored by level of vulnerability. The options included None (scored 4, the highest level of vulnerability); remittances, pension, gratuity, donations (scored 3); casual laborer/informal job /peasantry farming/labor on others' farms or gardens (scored 2); petty business (scored 1); and formal business, commercial farming or formal job/employment (scored 0, the lowest level of vulnerability). Across the at-risk households, there was a statistically significant increase in the proportion of households deriving income from petty businesses and decreases in those relying on the category of casual labor jobs and in those with no identified source of income (Table 6a). There was, however, a small uptick at endline in the proportion of households relying on donations or gifts of some kind (up from 4.9% to 6.1%). These trends were consistent across sub-groups.

A similar, though not significant shift was also observed among reintegrated households (Table 6b), with a reduced proportion of the sample relying on casual labor and an increase in the percentage of households deriving income from petty business. The group of households that received Community Skills showed little change from baseline to endline, and in the direction opposite of the aggregate sample.

Table 6a. FARE at-risk HHs main source of income (%)

	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=296)	(n=187)	(n=188)	(n=35)	(n=36)	(n=119)	(n=65)
<i>(most risky)</i> None	3.1	1.7*	2.1	1.6*	5.6	0.0	4.2	3.1
Remittance, pension, gratuity, donations	4.9	6.1*	3.7	5.3*	13.9	8.3	4.2	7.7
Casual laborer/Informal job/ Peasantry farming	54.0	41.2*	57.7	42.3*	47.2	33.3	50.4	40.0
Petty business	34.0	46.6*	31.8	47.1*	30.6	52.8	37.8	43.1
Formal business/job or employment <i>(least risky)</i>	4.0	4.4*	4.8	3.7*	2.8	5.6	3.4	6.2

Table 6b. FARE Reintegrating HHs main source of income (%)

	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=205)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=116)	(n=98)
<i>(most risky)</i> None	2.9	1.1	4.6	0.0	0.0	0.0	12.5	5.9	1.7	1.0
Remittance, pension, gratuity, donations	4.4	4.2	4.6	2.3	0.0	3.3	0.0	5.9	6.0	5.1
Casual labor/Informal job/Peasantry farming	52.7	48.7	59.1	56.8	58.6	60.0	68.8	41.2	46.6	42.9
Petty business	27.8	33.3	20.5	25.0	34.5	33.3	12.5	41.2	31.0	35.7
Formal business/job or employment <i>(least risky)</i>	12.2	12.7	11.4	15.9	6.9	3.3	6.3	5.9	14.7	15.3

Monthly Income

The HVAT asked respondents to provide information about the household's current monthly income in UGX value and according to ranges from less than UGX 50,000 (>USD 14) to above UGX 200,000 (USD 56). Among responding at-risk households, the median monthly income significantly increased from UGX 86,500 at baseline to UGX 150,000 (roughly from USD 24 to 42 at endline (Table 7a) with corresponding movement across income brackets: all groups recorded statistically significant reductions in the percentage of households earning less than UGX 50,000 and increases in the percentage of households earning UGX 150,000 and above. At endline, the median monthly household income remained below 100,000 UGX for 27% of at-risk households, down from 57% of households at baseline.

Among responding reintegrating households, the overall trends were similar: median monthly income increased slightly from UGX 100,000 at baseline to UGX 120,000 at endline, with corresponding redistribution of households across income brackets (Table 7b). The No ES households were the only group to record a decline in median monthly income. At endline, the median monthly household income across the reintegration sample remained below 100,000 UGX for 47% of at-risk households, down slightly from 51% of households at baseline. However, 50% or more of Community Skills and No ES households remained below the UGX 100,000 (USD 28) threshold.

Table 7a. FARE at-risk HHs monthly income.

	Aggregate sample		VSLA		CT + VSLA		No ES		
	Base	End	Base	End	Base	End	Base	End	
	(n=350)	(n=296)	(n=189)	(n=189)	(n=36)	(n=36)	(n=119)	(n=65)	
HH Median Monthly Income (UGX)	86,500	150,000*	100,000	160,000*	60,000	125,000*	60,000	150,000*	
Income Range in UGX (%)									
Less than 50,000 (< USD 14)	30.6	6.1*	22.8	3.2*	41.7	5.6*	39.5	15.4*	
50,000-99,000 (USD 14-28)	26.9	21.0*	26.5	20.1*	30.6	27.8*	24.4	21.5*	
100,000-149,000 (USD 28-42)	18.9	18.2*	22.2	19.6*	11.1	27.8*	16.8	10.8*	
150,000-200,000 (USD 42-56)	9.4	19.6*	10.1	20.1*	5.6	11.1*	10.1	21.5*	
Above 200,000 (USD >56)	14.3	35.1*	18.5	37.0*	11.1	27.8*	9.2	30.8*	

(USD approximations provided at average exchange rate over project period.)

Table 7b. FARE Reintegrating HHs monthly income.

	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=183)	(n=189)	(n=39)	(n=44)	(n=25)	(n=30)	(n=15)	(n=17)	(n=104)	(n=98)
HH Median Monthly Income (UGX)	100,000	120,000	110,000	125,000	105,000	110,000	90,000	150,000	110,000	100,000
Income Range in UGX (%)										
Less than 50,000 (< USD 14)	25.7	12.7*	33.3	9.1*	32.0	20.0	26.7	17.7	21.2	11.2*
50,000-99,000 (USD 14-28)	25.7	34.9*	23.1	31.8*	20.0	30.0	20	23.5	28.9	39.8*
100,000-149,000 (USD 28-42)	12.0	13.8*	7.7	20.5*	8.0	13.3	20	17.7	13.5	10.2*
150,000-200,000 (USD 42-56)	14.8	16.9*	20.5	20.5*	16.0	23.3	13.3	11.8	12.5	14.3*
Above 200,000 (USD >56)	21.9	21.7*	15.4	18.2*	24.0	13.3	20	29.4	24.0	24.5*

(USD approximations provided at average exchange rate over project period.)

Ability to Pay for Recurrent Expenses

The HVAT asked respondents to report the number of months, out of the last three, respondents had been able to pay for food, shelter and water; health care; and education, without having to sell productive assets to do so. One point was scored for ability to pay per month and per category of expense for a maximum possible score of nine.

Across the at-risk sample, average ability to pay increased significantly in each category of basic resources (Table 8a). Improvements were seen in every category of economic strengthening activity and for each type of basic resource. The largest increases in average number of months able to pay were among the CT+VSLA group, which reported baseline values lower than the other groups. Over 64% of households in the total at-risk sample indicated full ability to pay for basic resources (scored 9), up from 48% at baseline. Of the sub-groups, only the households receiving CT+VSLA did not meet this proportion, though they did record improved ability to pay, with the proportion scoring 9 nearly doubling, from 25% to 44%.

Similar trends demonstrating increased ability to pay for basic needs were observed among the reintegration sample (Table 8b). Increases in the average number of months families that could pay for resources were seen in every category of economic strengthening activity and for each type of basic resources. Though there were generally increases across the board from baseline to endline in ability to pay, the only group to register over 50% of households indicating full ability to pay for basic resources (scored 9) was the No ES category.

Table 8a. FARE At-Risk HHs, Average # of months able to pay for basic needs.

Avg number of months (of past 3) HH able to pay for:	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=296)	(n=189)	(n=189)	(n=36)	(n=36)	(n=119)	(n=65)
Food, shelter	2.2	2.6*	2.2	2.6*	1.6	2.4*	2.3	2.7
Health care	2.0	2.5*	2.0	2.5*	1.4	2.2*	2.2	2.7*
Education	1.9	2.4*	1.9	2.4*	1.3	1.8*	2.3	2.6
Score* (%)								
9	47.7	64.9*	42.9	64.6*	25.0	44.4*	63.9	75.4
8	2.3	9.5*	2.1	10.6*	0	5.6*	2.5	7.7
7	4	4.7*	4.8	6.9*	2.8	0*	3.4	1.5
3-4	18.9	9.5*	25.4	6.4*	19.4	33.3*	9.2	6.2
0-3	27.1	11.5*	24.9	11.6*	52.8	16.7*	21.0	9.2

*Score calculated as sum of number of months HH was able to consistently pay for each resource category (0-3 months allowed per category) (higher scores better).

Table 8b. FARE Reintegration HHs, Average # of months HH able to pay for basic needs.

Avg number of months (of past 3) HH able to pay for:	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=204)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=115)	(n=98)
Food, shelter	2.0	2.5*	2.0	2.5*	1.9	2.3	1.6	2.4	2.1	2.6*
Health care	1.8	2.2*	1.4	2.0*	1.8	2	1.8	2.2	1.9	2.4 *
Education	1.7	2.2*	1.3	1.9*	1.6	2	1.9	2	1.8	2.4 *
Score* (%)										
9	27.5	43.9*	13.6	20.5*	24.1	36.7	31.3	29.4	33.0	59.2*
8	2.5	3.7*	4.6	0*	3.5	0	0	5.9	1.7	6.0*
7	7.4	15.9*	6.8	34.1*	6.9	13.3	12.5	29.4	7.0	6.0*
3-4	35.8	25.9*	40.9	34.1*	34.5	40	25	17.7	35.7	19.4*
0-3	27.0	10.6*	34.1	11.4*	31	10	31.3	17.7	22.6	9.2*

*Score calculated as sum of number of months HH was able to consistently pay for each resource category (0-3 months allowed per category) (higher scores better).

Financial Coping Strategies

Respondents were asked to explain all coping responses they would use to handle expenses in the event of an unexpected shock, such as a death in the family. Data collectors ticked the responses mentioned from a list of 14 possible responses (which were not read to the respondent). Each type of coping response was assigned a point value of 0 (lowest risk level) to 4 (highest risk level); households received a final score that corresponded with the respondent's highest-risk response.

Overall among the at-risk sample there was a significant shift in household scores, with the proportion of households mentioning a lower-risk coping response increasing from baseline to endline, and a corresponding decrease in highest-risk coping responses over the same time period (Table 9a). At baseline, over 50% of VSLA and CT+VSLA households reported a higher risk strategy (score 3, 4) for handling financial shocks; this decreased to 26% and 39%, respectively, at endline. (The proportion of No ES households indicating reliance on a higher-risk strategy also decreased, from 39% to 27%.)

Reintegrating households, by contrast, demonstrated a shift toward higher-risk strategies for responding to shock (Table 9b). The overall proportion of reintegrating households reporting reliance on a higher risk (score 3, 4) strategy rose, from 58% to 63%; only households in the Community Skills group reported a decline in the proportion of households relying on higher risk strategies to handle an unexpected expense. None of the observed changes among reintegrating households were statistically significant.

Table 9a. FARE At-Risk HH, means of handling expenses of an unexpected shock.

Strategies for handling economic shocks		Aggregate sample		VSLA		CT + VSLA		No ES	
		Base	End	Base	End	Base	End	Base	End
		(n=350)	(n=295)	(n=187)	(n=188)	(n=35)	(n=36)	(n=119)	(n=65)
Highest scored** response (% selected)									
<i>low risk</i>	0	4.9	3.1*	4.3	1.6*	5.7	5.6*	5.0	6.2
	1	35.2	58.0*	33.2	60.6*	22.9	47.2*	43.7	60
	2	8.9	11.2*	8.0	12.2*	2.9	8.3*	12.6	6.2
	3	16.4	15.3*	19.8	16.0*	8.6	16.7*	13.5	13.9
<i>high risk</i>	4	34.6	12.5*	34.8	9.6*	60.0	22.2*	25.2	13.9

**Not mutually exclusive; HHs indicated all of the approaches they might use and were scored based on the highest risk option.

Table 9b. FARE Reintegration HH, means of handling expenses of an unexpected shock.

Strategies for handling economic shocks		Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
		Base	End	Base	End	Base	End	Base	End	Base	End
		(n=203)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=115)	(n=98)
Highest scored** response (% selected)											
<i>low risk</i>	0	1.5	0.5	0	0	3.6	3.3	0	0	1.7	0
	1	27.6	21.7	25.0	22.7	10.7	20.0	31.3	29.4	32.2	20.4
	2	12.3	14.8	0	0	7.1	13.3	6.3	5.9	19.1	23.5
	3	14.8	23.8	20.5	25.0	17.9	20.0	18.8	35.3	11.3	22.5
<i>high risk</i>	4	43.8	39.2	54.6	52.3	60.7	43.3	43.8	29.4	35.7	33.7

**Not mutually exclusive; HHs indicated all of the approaches they might use and were scored based on the highest risk option.

CPA 2 – Food Security and Nutrition

CPA 2 on the HVAT measures items related to food security and nutrition with three questions about source of food, what the family usually eats, and number of meals per day. The scoring on this CPA ranges from 0-12, with higher scores representing higher vulnerability. Both the at-risk (Table 10a) and reintegration samples (Table 10b) recorded decreased vulnerability related to areas covered by CPA 2 at endline based on average scores, though scores were already relatively low at baseline.

Table 10a. FARE at-risk HHs CPA 2 summary

Average total score for CPA 2 (0-12, higher = more vulnerable)	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=295)	(n=189)	(n=188)	(n=36)	(n=36)	(n=119)	(n=65)
	3.7	2.7*	3.4	2.7*	4.9	3.3*	3.8	2.8*

Table 10b. Reintegration HHs CPA 2 summary

Average total score for CPA 2 (0-12, higher = more vulnerable)	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=183)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=104)	(n=98)
	3.0	2.5*	3.1	2.9	2.8	2.7	3.3	2.8	3.0	2.2*

Meals per day

Slightly less than three-quarters (72%) of all at-risk households reported eating two or more meals per day at endline, a 25-point increase from baseline (Table 11a). For all at-risk groups, the proportion of households having only one meal per day decreased significantly at endline, though it remained above 25% for all groups. Over three-quarters of the reintegrating households reported eating two or more meals per day at endline, a slight increase from baseline (Table 11b). Most groups in the reintegration sample recorded reductions in the percentage of households with one or no meals per day.

Table 11a. FARE at-risk HHs, meals per day summary

# of meals per day in HH (%)	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=295)	(n=189)	(n=188)	(n=36)	(n=36)	(n=119)	(n=65)
3 + meals	8.0	19.3*	10.6	23.3*	0	11.1*	6.7	10.8*
2 meals	39.1	52.7*	43.9	50.3*	27.8	47.2*	36.1	61.5*
One meal	48.3	27.7*	42.9	25.9*	58.3	41.7*	52.1	27.7*
Some days no meal	4.6	0.3*	2.7	0.5*	13.9	0*	5.0	0*

Table 11b. FARE Reintegration HHs, meals per day summary

# of meals per day in HH (%)	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=183)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=104)	(n=98)
3 + meals	21.3	23.8*	10.3	9.1	32.0	23.3	13.3	29.4	24.0	29.6*
2 meals	54.6	56.1*	53.9	65.9	48.0	56.7	46.7	41.2	57.7	54.1*
One meal	19.7	16.9*	30.8	22.7	12.0	20.0	33.3	5.9	15.4	15.3*
Some days no meal	4.4	3.2*	5.1	2.3	8.0	0	6.7	23.5	2.9	1.0*

CPA 3 – Health, Water, Sanitation and Shelter

CPA 3 on the HVAT measures items related to health and access to safe water, hygiene/sanitation, and shelter. The scoring on this CPA ranges from 0-12, with higher scores representing higher vulnerability. A question on household safety measures the adequacy of access to eight assets related to health, ranging from access to safe water to mosquito nets. Scores correspond with the number of household items missing, on a scale of 0-4, with higher scores reflecting increasing vulnerability. Enumerators visually assessed shelter conditions by observing the physical household dwelling structure.

Average CPA 3 scores decreased from baseline to ending across the at-risk sample of households, representing improved conditions related to shelter and sanitation. At baseline, less than half (49%) of at-risk households were living in adequate or fairly adequate shelter; this increased to 75% at endline (Table 12a). Improvements to household shelter status were observed in every category at endline, with the greatest improvements observed among households receiving CT+VSLA. Baseline shelter conditions for the reintegration sample were relatively better than at-risk households, with 75% of reintegrating households living in adequate or fairly adequate shelter at baseline. This increased to 80% at endline (Table 12b) and improvements to household shelter status were observed in every ES category.

With regard to hygiene and sanitation scores, across all at-risk groups, the distribution of households across the score range showed significant movement toward better hygiene and sanitation conditions – there were reductions in the proportion of households scoring 4 (highest risk) and increases in the proportion with lower scores. This held for reintegration households as well, which saw reduced proportions of households scoring 4 in all ES categories, indicating improvement in household access to items related to hygiene and sanitation.

Table 12a. FARE at-risk HHs, Summary of CPA 3 – Shelter

HH shelter status	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	Base	End	Base
	(n=350)	(n=296)	(n=189)	(n=189)	(n=36)	(n=36)	(n=119)	(n=65)
Average CPA 3 score (0-12, higher=more vulnerable)	8.1	5.4*	7.9	5.0*	10.5	6.3*	7.6	6.0*
No stable shelter	11.1	5.7*	8.5	3.2*	33.3	11.1*	8.4	9.2
Shelter needs major repairs	30.3	19.6*	24.9	16.4*	50.0	33.3*	32.8	23.1
Shelter fairly adequate, safe	30.3	33.8*	33.3	32.8*	8.3	27.8*	33.6	38.5
Shelter is safe, adequate	28.3	40.9*	33.3	47.6*	8.3	27.8*	25.2	29.2
Hygiene/ sanitation conditions scores** (%)								
4	41.4	13.5*	42.3	12.7*	55.6	25.0*	35.3	10.8*
3	20.3	17.9*	19.1	16.9*	25.0	11.1*	10.2	23.1*
2	16.0	27.0*	12.7	28.6*	11.1	19.4*	22.7	26.2*
1	15.1	25.3*	16.4	24.9*	8.3	30.6*	16.0	23.1*
0	7.1	16.2*	9.5	16.9*	0	14.9*	5.9	16.9*

**Score calculated as number of basic health and hygiene features found in home out of 8 features (4=4 or more are missing, 3=3 are missing, 2=2 are missing, 1=1 is missing, and 0=all are present); lower scores better.

Table 12b. Reintegration HHs, Summary of CPA 3 – Shelter

HH shelter status (%)	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	Base	End	Base	End	Base
	(n=183)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=104)	(n=98)
Average CPA 3 score (0-12, higher=more vulnerable)	6.5	5.2*	6.9	6.2	7.9	5.8	6.1	4.8	6.1	4.7*
No stable shelter	7.7	1.6*	0.0	0.0*	24.0	3.3	0.0	5.9	7.7	1.0*
Shelter needs major repairs	16.9	18.0*	33.3	25.0*	20.0	30.0	20.0	11.8	9.6	12.2*
Shelter fairly adequate, safe	27.3	39.7*	35.9	54.6*	16.0	36.7	20.0	41.2	27.9	33.7*
Shelter is safe, adequate	48.1	40.7*	30.8	20.5*	40.0	30.0	60.0	41.2	54.8	53.1*
Hygiene/ sanitation conditions scores** (%)										
4	32.6	15.9*	38.6	27.3	34.5	16.7	18.8	5.9	31.9	12.2*
3	22.0	20.1*	20.5	20.5	24.1	10.0	31.3	11.8	20.7	24.5*
2	16.6	24.3*	13.6	29.6	20.7	26.7	12.5	41.2	17.2	18.4*
1	14.2	20.6*	11.4	15.9	13.8	23.3	25.0	17.7	13.8	22.5*
0	14.6	19.1*	15.9	6.8	6.9	23.3	12.5	23.5	16.4	22.5*

**Score calculated as number of basic health and hygiene features found in home out of 8 features (4=4 or more are missing, 3=3 are missing, 2=2 are missing, 1=1 is missing, and 0=all are present); lower scores better.

CPA 4 – Education

The HVAT’s CPA 4 contains a single question about the proportion of school-aged children in the family who attend school regularly, with regular attendance defined as not missing more than 30 days within a school term. Over half (51.7%) of children in the at-risk sample were reported to be attending school regularly at endline (Table 13a), up from 26% at baseline. The average increase in the aggregate sample was driven by similar increases in the VSLA and No ES households; the CT+VSLA at-risk group registered a slight but not significant decrease in the proportion of households with all children attending school regularly. All categories of at-risk households did see a substantial decrease in the proportion of households with no children attending school (significant for the overall sample and VSLA sub-group). Households in the aggregate reintegration sample recorded a reduction by half in the proportion of children not attending school at baseline (from 19% - 9%), with small but significant increases in all other categories of attendance (Table 13b). The proportion of households with all children attending school regularly remained below 50% at baseline for the overall sample (45%), reflecting lower proportions for CT and Community Skills households (25% and 30%, respectively) and over 50% of households in Other ES and No ES groups reporting all children regularly attending school.

Table 13a. FARE at-risk HHs, Summary of CPA 4 - Education

Regular school attendance (%)	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=296)	(n=189)	(n=189)	(n=36)	(n=36)	(n=119)	(n=65)
None attend regularly	20.6	9.1*	17.5	8.5*	36.1	16.7	21.0	7.7
Less than 50% of children	22.9	10.1*	25.9	6.9*	22.2	25.0	16.8	12.3
50% or more of children	27.1	22.3*	28.0	18.5*	19.4	27.8	28.6	27.7
All attend regularly	26.3	51.7*	24.3	60.3*	22.2	19.4	21.1	47.7
Children aged under 5 only	3.1	6.8*	4.2	5.8*	0	11.1	2.5	4.6

Table 13b. Reintegration HHs, Summary of CPA 4 - Education

Regular school attendance (%)	Aggregate sample		Cash Transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=183)	(n=189)	(n=39)	(n=44)	(n=25)	(n=30)	(n=15)	(n=17)	(n=104)	(n=98)
None attend regularly	18.6	9.0*	23.1	13.6	16.0	13.3	13.3	0	18.3	7.1*
Less than 50% of children	12.6	14.8*	15.4	15.9	20.0	23.3	0	0	11.5	14.3*
50% or more of children	18.6	22.2*	20.5	36.4	20.0	20.0	20.0	23.5	17.3	16.3*
All attend regularly	42.6	45.0*	25.6	25.0	36.0	30.0	53.3	64.7	49.0	55.1*
Children aged > 5 only	7.7	9.0*	15.4	9.1	8.0	13.3	13.3	11.8	3.9	7.1*

CPA 5 – Psychosocial Support and Basic Care

Four questions on the HVAT under CPA 5 are related to psychosocial support and care. Possible scores range from 0 to 20, with higher scores reflecting greater vulnerability. Average scores on this domain for both at-risk and reintegrating households decreased significantly from baseline to endline, from 8.6 to 4.7 for at-risk households (Table 14a) and from 7.6 to 6.8 for reintegrating households (Table 14b), reflecting less vulnerability in this area. For at-risk households, all categories of participants recorded substantial decreases in the proportion of caregivers reporting no one or just one person to turn to for emotional or material support at endline, and similar increases in the proportion of households reporting two or more sources of emotional and material support. The distribution of households in the aggregate reintegration sample shifted from less to more support, generally, for both emotional and material support. The Other ES group, however, recorded the opposite, with a greater proportion of households reporting less support at endline.

Table 14a. FARE at-risk HHs, Summary of CPA 5 – Psychosocial support and basic care

	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=295)	(n=189)	(n=188)	(n=36)	(n=36)	(n=119)	(n=65)
Average score for CPA 5, 0-20 (higher = more vulnerability)	8.6	4.7*	8.4	4.4*	11.1	5.8*	8.1	5.2*
# of people respondent can approach for emotional support								
Nobody	19.4	5.1*	17.5	4.3*	30.6	8.3*	18.5	6.2*
1 person	46.9	25.1*	49.7	23.9*	44.4	27.8*	42.0	27.7*
2 people	20.9	40.7*	20.6	38.3*	19.4	36.1*	22.7	46.2*
3 or more people	12.9	29.2*	12.2	33.5*	5.6	27.8*	16.8	20.0*
# of people respondent can approach for material support								
Nobody	24.0	10.5*	25.9	10.1*	25.0	13.9	19.3	10.8*
1 person	41.1	23.3*	39.7	21.7*	47.2	27.8	41.2	26.2*
2 people	21.4	45.3*	21.7	43.9*	22.2	50.0	21.9	44.6*
3 or more people	13.4	21.0*	12.7	24.3*	5.6	8.3	17.7	18.5*

Table 14b. Reintegration HHs, Summary of CPA 5 – Psychosocial support and basic care.

	Aggregate sample		Cash transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=182)	(n=189)	(n=39)	(n=44)	(n=25)	(n=30)	(n=15)	(n=17)	(n=103)	(n=98)
Average score for CPA 5, 0-20 (higher = more vulnerability)	7.6	6.8*	9.4	7.8*	7.6	6.9	6.2	7.2	7.1	6.3
# of people respondent can approach for emotional support										
Nobody	12.1	6.9*	20.5	4.6*	8.0	10.0	0	11.8	11.7	6.1*
1 person	37.9	40.2*	33.3	43.2*	36.0	36.7	33.3	35.3	40.8	40.8*
2 people	29.1	39.7*	23.1	47.7*	8.0	43.3	46.7	35.3	29.0	35.7*
3 or more people	20.9	13.2*	23.1	4.6*	28.0	10.0	20.0	17.7	18.5	17.4*
# of people respondent can approach for material support										
Nobody	18.0	7.9*	25.6	6.8*	20.0	10.0	0	5.9	17.3	8.2*
1 person	38.8	43.4*	35.9	40.9*	40.0	46.7	40.0	52.9	39.4	41.8*
2 people	24.0	39.7*	23.1	47.7*	20.0	36.7	20.0	29.4	26.0	38.8*
3 or more people	19.1	9.0*	15.4	4.6*	20.0	6.7	40.0	11.8	17.3	11.2*

CPA 6 - Child Protection and Legal Care

The HVAT includes questions under CPA 6 relating to child protection issues in the family. We report data from this domain on abusive child disciplinary practices used by caregivers and children’s experience of abuse, neglect, or other child protection issues.

Substantial reductions in rates of harsh discipline were reported across all at-risk household categories from baseline to endline (Table 15a). Self-reported assessments of child protection issues in the home indicated movement from more-risky to less-risky home environments for children, with reductions in the proportions of households across categories reporting child protection concerns. Exposure to regular adult abuse of alcohol or drugs was still reported by about half of households (between 47% and 63%) at endline.

Overall, the reintegration households indicated some movement away from harsh discipline practices, with substantial reductions in the use of physical discipline or withholding food, but essentially no change on the use of abusive language across the aggregate sample (Table 15b). Self-reported assessments of child protection issues in the home remained relatively stable. The proportion of households reporting child labor and neglect increased among CT households; child labor and child use of alcohol increased among Community Skills households; neglect was reported by an increasing proportion of Other ES households; and neglect, child use of alcohol, and adult use of alcohol were reported by a larger percentage of No ES households at endline.

Table 15a. FARE At-Risk, HH child protection issues

	Aggregate sample		VSLA-only		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=292)	(n=189)	(n=186)	(n=34)	(n=34)	(n=119)	(n=64)
Caregiver(s) used method of discipline (% selected; not mutually exclusive)^								
Punched, kicked or hit a child	49.4	12.5	49.2	11.6	58.3	13.9	47.9	13.9
Withheld meal/basic needs to punish	6.0	3.7	6.9	3.2	8.3	2.8	3.4	4.6
Used abusive language toward child	49.4	20.6	49.2	15.3	52.8	33.3	50.4	30.8
Abuse a child experienced in HH in the last 12 months/since last assessment (% selected; not mutually exclusive) ^								
Repeated physical abuse	25.7	5.1	24.9	4.8	19.4	2.8	28.6	7.7
Involved in child labor	42.6	14.2	41.3	13.2	55.6	22.2	40.3	13.9
Sexually abused, raped, forced sex	4.9	3.0	4.2	2.7	16.7	8.3	1.7	1.5
Stigmatized/discriminated due to illness, disability or otherwise	15.7	2.7	19.1	3.2	25.0	2.8	8.4	1.5
Neglected	49.4	8.1	47.6	5.3	52.8	8.3	50.4	16.9
Been in conflict with the law	15.1	4.1	12.7	4.8	8.3	5.6	21.0	1.5
Child abused alcohol or drugs	8.6	2.7	9.0	2.1	11.1	0	6.7	6.2
Witnessed regular adult abuse of alcohol or drugs	59.1	49.7	54.0	47.1	75.0	41.7	63.0	63.1

Table 15b. FARE Reintegration, HH child protection and legal support

	Aggregate sample		CT-only		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=198)	(n=189)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=112)	(n=98)
Caregiver(s) used method of discipline (% selected; not mutually exclusive)^										
Punched, kicked or hit a child	47.3	23.8	65.9	11.4	55.2	40.0	62.5	23.5	36.2	24.5
Withheld meal/basic needs to punish	10.7	1.6	9.1	2.3	20.7	0	6.3	5.9	9.5	1.0
Used abusive language toward child	40.0	40.2	52.3	50.0	31.0	23.3	56.3	23.5	35.3	43.9
Abuse a child experienced in HH in the last 12 months/since last assessment (% selected; not mutually exclusive)^										
Repeated physical abuse	8.3	9.0	11.4	2.3	13.8	6.7	12.5	17.7	5.2	11.2
Involved in child labor	10.7	12.7	22.7	29.6	6.9	10.0	6.3	5.9	7.8	7.1
Sexually abused, raped, forced sex	2.0	0.0	2.3	0.0	0.0	0.0	0.0	0.0	2.6	0.0
Stigmatized/discriminated due to illness, disability or otherwise	7.8	5.3	9.1	9.1	3.5	3.3	6.3	5.9	8.6	4.1
Neglected	16.6	20.1	22.7	36.4	13.8	3.3	12.5	29.4	15.5	16.3
Been in conflict with the law	19.5	6.4	36.4	9.1	17.2	6.7	6.3	0.0	15.5	6.1
Child abused alcohol or drugs	1.5	1.6	4.6	2.3	0.0	3.3	0.0	0.0	0.9	1.0
Witnessed regular adult abuse of alcohol or drugs	8.8	12.7	15.9	6.8	10.3	10.0	12.5	11.8	5.2	16.3

Child and Caregiver Integration Status Tools

The Child Integration Status Tool includes six key domains: enjoyment of education; social well-being; parent-child attachment; community belonging; emotional well-being; and safety. The Caregiver Integration Status Tool includes the same domains, excepting enjoyment of education. In each domain five statements are rated on a four-point scale (I disagree a lot, I disagree a little, I agree a little, I agree a lot). Each statement is worded positively, so low scores reflect disagreement with a positive statement. All questions were asked, independently, of the child or the caregiver about him or herself.

Child Integration Status Tool

Average domain scores among children in the at-risk sample increased significantly for most domains and all groups (Table 16a). In the overall sample, the average score at endline was lowest for enjoyment of education (16.0) and highest for social well-being (18.6). An increase in the percentage of children attending school, from 67% to 80.4% was reflected in increased scores for enjoyment of education. Average domain scores among children in the reintegration sample also increased for all domains (Table 16b). An overall increase in the percentage of children attending school, from 56.7% to 71.6% was reflected in an increased score for enjoyment of education, though in the overall sample, the average score for this domain was lowest (13.9).

Table 16a. FARE At-Risk HHs, child integration status.

	Aggregate sample		VSLA		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=348)	(n=275)	(n=189)	(n=180)	(n=35)	(n=34)	(n=118)	(n=55)
Enjoyment of education	13.8	16.0*	13.7	16.2*	11.9	13.7	14.5	16.4
<i>Currently attending school or training (% selected)</i>	67.0	80.4*	66.7	81.1*	51.4	70.6	72	83.6
Social well-being	16.6	18.6*	16.7	18.8*	15.6	17.8*	16.7	18.7*
Parent-child attachment	16.6	18.5*	16.6	18.5*	15.7	17.8*	16.9	18.8*
Community belonging	14.3	16.6*	14.2	16.6*	13.4	16.1*	14.5	16.7*
Emotional well-being	15.8	18.1*	15.8	18.1*	14.9	17.7*	15.9	18.2*
Safety	15.9	18.2*	16.0	18.4*	14.4	17.4*	16.2	18.3*

Table 16b. FARE Reintegration HHs, child integration status.

	Aggregate sample		Cash transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=189)	(n=171)	(n=42)	(n=42)	(n=26)	(n=26)	(n=14)	(n=17)	(n=105)	(n=84)
Enjoyment of education	11.8	13.9*	10.7	12.2	12.3	13.5	16.1	17.6	11.5	14.2*
<i>Currently attending school or training (%)</i>	56.7	71.6*	47.6	57.1	57.7	76.9	92.9	94.1	55.2	72.6*
Social well-being	15.9	17.0*	15.0	16.5*	15.8	16.9	17.4	17.2	16.0	17.3*
Parent-child attachment	15.4	17.0*	15.0	16.9*	15.1	16.7	16.3	17.4	15.6	17.0*
Community belonging	13.6	15.4*	12.8	15.2*	13.2	14.9	14.6	16.4	13.8	15.5*
Emotional well-being	14.9	16.8*	15.0	16.5*	14.7	16.3	16.1	17.3	14.7	17.0*
Safety	15.1	16.5*	14.4	15.6*	14.4	15.8	17.1	17.3	15.2	17.0*

Caregiver Integration Status Tool

As with children, caregivers' average scores for both at-risk and reintegrating households showed significant increases over baseline scores. In the overall sample of at-risk household caregivers, the lowest endline domain score was for community belonging (17.5), though this domain showed the greatest increase from baseline (Table 17a). Among reintegrating households, scores were slightly lower – at baseline and endline (Table 17b).

Table 17a. FARE At-Risk HHs, caregiver integration status.

	Aggregate sample		VSLA-only		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=292)	(n=189)	(n=187)	(n=36)	(n=36)	(n=119)	(n=63)
Social well-being	16.5	18.2*	16.7	18.3*	15.8	18.1*	16.5	17.8*
Parent-child attachment	17.1	18.7*	17.2	18.8*	16.2	18.1*	17.3	18.8*
Community belonging	15.0	17.5*	15.2	18.0*	14.2	17.4*	14.6	16.0*
Emotional well-being	15.4	17.7*	15.7	18.0*	14.3	17.3*	15.4	16.9*
Care and safety	16.3	18.3*	16.5	18.4*	15.7	18.1*	16.2	18.0*

Table 17b. FARE Reintegration HHs, caregiver integration status.

	Aggregate sample		Cash transfer		Community Skills		Other ES		No ES	
	Base	End	Base	End	Base	End	Base	End	Base	End
	(n=203)	(n=188)	(n=44)	(n=44)	(n=29)	(n=30)	(n=16)	(n=17)	(n=114)	(n=97)
Social well-being	16.6	17.2*	16.2	16.9	16.6	17.4	17.4	17.0	16.7	17.3
Parent-child attachment	15.9	16.9*	16.3	17.1	15.8	16.9	15.5	16.8	15.8	16.7
Community belonging	15.2	16.3*	15.0	16.3*	13.9	15.3	16.4	17.1	15.5	16.5*
Emotional well-being	16.0	16.8*	15.9	16.5	15.8	15.8	16.4	17.6	16.1	17.1*
Care and safety	15.9	16.6*	15.9	17.0*	15.6	16.6	15.9	17.7	16.1	16.3

Family-child separation

The HVAT elicited information on children living outside of the home for any reason, including those for which the child was presumed to still be connected to the family (living with relatives or attending school) and those considered concerning family-child separations (child left home for a job, the family doesn't know where the child is, or the child isn't with the family because s/he doesn't like living there).

For the overall sample of at-risk households, the proportion of households with a child living outside of the home for any reason decreased significantly by about 9% from baseline to endline (Table 18a). For reintegrating households, about 38% reported having had a child living outside of the home in the past six months for any reason at endline, nearly twice the percentage of at-risk households (Table 18b). [Baseline rates for reintegrating households are presumed to be 100%; reasons for children living outside the home at baseline were not consistently recorded.]

A primary outcome measure for assessment of the FARE combinations of activities was separation of a child from his or her household for a reason other than going to school or living with relatives. At endline, 10 (3%) of the at-risk households and 30 (16%) of the reintegrating households had a child who was currently separated or had been within the past six months. The CT+VSLA category of households reported the greatest proportion of separations (14%) among the at-risk sample. The No ES group reported the highest proportion of separations among the reintegration sample (18%).

Table 18a. FARE at-risk households, children living outside of household/separations

	Aggregate sample		VSLA-only		CT + VSLA		No ES	
	Base	End	Base	End	Base	End	Base	End
	(n=350)	(n=292)	(n=189)	(n=186)	(n=36)	(n=36)	(n=119)	(n=64)
Had child(ren) not living with HH at some point in past 6 months (n,%)	109 31.1%	64 21.9%*	51 27.0%	37 19.9%	13 36.1%	10 27.8%	40 33.6%	14 21.9%
Of HHs above, reason for child(ren) not living with HH (n, %)								
Child living with relative because HH can't support	38 35.2%	26 41.3%*	14 27.5%	15 41.7%	6 46.2%	2 20.0%	15 38.5%	8 57.1%*
Child went to school	44 40.7%	27 42.9%*	24 47.1%	17 47.2%	5 38.5%	3 30.0%	15 38.5%	5 35.7%*
SEPARATION - Child left home for job/ Don't know where the child has gone	21 19.4%	5 7.9%*	11 21.6%	2 5.6%	1 7.7%	3 30.0%	8 20.5%	0 0%*
SEPARATION - Child does not like staying in this home	5 4.6%	5 7.9%*	2 3.9%	2 5.6%	1 7.7%	2 20.0%	1 2.6%	1 7.1%*
SEPARATIONS (n, % of full sample)	26 7.4%	10 3.4%	13 6.9%	4 2.2%	2 5.9%	5 13.9%	9 7.6%	1 1.5%

Table 18b. FARE reintegrating households, children living outside of household/separations

(endline only)	Aggregate sample	CT-only	Community Skills	Other ES	No ES
	(n=189)	(n=44)	(n=30)	(n=17)	(n=98)
Had child(ren) not living with HH at some point in past 6 months (n,%)	71 37.6%	16 36.4%	13 43.3%	8 47.1%	34 34.7%
Of HHs above, reason for child(ren) not living with HH (n, %)					
Child living with relative because HH can't support	18 25.0%	6 37.5%	3 23.1%	3 37.5%	6 17.1%
Child went to school	24 33.3%	4 25.0%	6 46.2%	3 37.5%	11 31.4%
SEPARATION - Child left home for job / Don't know where the child has gone	20 27.8%	5 31.3%	3 23.1%	2 25.0%	10 28.6%
SEPARATION - Child does not like staying in this home	10 13.9%	1 6.3%	1 7.7%	0 0.0%	8 22.9%
SEPARATIONS (n, % of full sample)	30 15.7%	6 13.7%	4 13.3%	2 11.8%	18 17.9%

A comparison of the baseline characteristics of households that did and did not experience a separation at endline (Table 19) yielded a few statistically significant differences (at $p \leq .05$). Among at-risk households, baseline values for education level of the head of household, shelter status, and availability of emotional support for the primary caregiver were statistically significantly different for households that recorded a child separation. Generally, separated households recorded lower levels of education, shelter, and emotional support than households that did not report a child separation. Across the reintegration sample, households that experienced a separation had statistically significantly different baseline values for education level of the head of household and level of regular school attendance by children in the household. Households that experienced a separation had generally lower values for both of these indicators.

Table 19. Baseline characteristics of households that did and did not experience a separation

	FARE at-risk households			FARE reintegrating households		
	Not separated (N = 283)	Separated (N = 10)	p-value	Not separated (N = 155)	Separated (N = 24)	p-value
Age of HH head			0.390			0.983
Mean (SD)	41.42 (11.92)	44.70 (8.53)		40.01 (10.62)	39.96 (9.37)	
Female head of HH			0.144			0.495
Yes	233 (82.3%)	10 (100.0%)		89 (57.4%)	12 (50.0%)	
Education of HH Head			0.054			0.053
None	39 (13.8%)	4 (40.0%)		10 (6.5%)	4 (16.7%)	
Primary	164 (58.0%)	3 (30.0%)		78 (50.3%)	15 (62.5%)	
Secondary and above	79 (27.9%)	3 (30.0%)		58 (37.4%)	4 (16.7%)	
.	1 (0.4%)	0 (0.0%)		9 (5.8%)	1 (4.2%)	
Marital Status of HH Head			0.741			0.857
Single	50 (17.7%)	1 (10.0%)		19 (12.3%)	4 (16.7%)	
Married/Cohabiting	122 (43.1%)	5 (50.0%)		87 (56.1%)	13 (54.2%)	
Widowed	53 (18.7%)	1 (10.0%)		21 (13.5%)	2 (8.3%)	
Separated/divorced	58 (20.5%)	3 (30.0%)		27 (17.4%)	4 (16.7%)	
N of children in HH			0.738			0.411
Mean (SD)	4.28 (2.04)	4.50 (1.18)		3.53 (1.99)	3.17 (2.10)	
Non-biological children in HH			0.860			0.990
Mean (SD)	1.77 (2.29)	1.90 (2.02)		1.30 (1.88)	1.30 (1.52)	
N of adults in HH			0.388			0.857
Mean (SD)	2.36 (1.59)	2.80 (1.32)		2.15 (1.38)	2.21 (1.10)	
Shelter unstable, inadequate or unsafe			0.012			0.320
Yes	114 (40.3%)	8 (80.0%)		37 (23.9%)	8 (33.3%)	
HH able to pay food last 3 months			0.601			0.726
No	118 (41.7%)	5 (50.0%)		77 (49.7%)	11 (45.8%)	
Less than 2 meals per day			0.869			0.251
Yes	149 (52.7%)	5 (50.0%)		35 (22.6%)	8 (33.3%)	
HH able to pay health last 3 months			0.586			0.645
No	138 (48.8%)	4 (40.0%)		98 (63.2%)	14 (58.3%)	
HH able to pay education last 3 months			0.974			0.328
No	140 (49.5%)	5 (50.0%)		100 (64.5%)	13 (54.2%)	
Regular school attendance			0.165			0.049
All children in HH	82 (29.0%)	1 (10.0%)		80 (51.6%)	6 (25.0%)	
Some children in HH	149 (52.7%)	5 (50.0%)		49 (31.6%)	11 (45.8%)	
None	52 (18.4%)	4 (40.0%)		26 (16.8%)	7 (29.2%)	
Harsh discipline methods (any)			0.582			0.973
Yes	204 (72.1%)	8 (80.0%)		115 (74.2%)	18 (75.0%)	
Caregiver emotional support			0.041			0.581
Nobody	51 (18.0%)	5 (50.0%)		19 (12.3%)	4 (16.7%)	
1 person	139 (49.1%)	3 (30.0%)		61 (39.4%)	7 (29.2%)	
2 or more people	93 (32.9%)	2 (20.0%)		73 (47.1%)	13 (54.2%)	

Summary of Findings by Economic Strengthening Activity

The findings, summarized below by economic strengthening activity, provide insight on changes within households that participated in FARE packages of activities; Table 20 facilitates further comparison.

AT-RISK households receiving VSLA (n = 187)

Child protection

The proportion of at-risk VSLA households experiencing a child separation at endline, at 2%, was slightly lower than for the full sample of FARE at-risk households. The proportion of households reporting any child experience of physical or sexual abuse, neglect, discrimination, or involvement in child labor decreased substantially from baseline to endline, as did self-reported use of harsh discipline practices. There was a four-fold decline in the proportion of caregivers reporting punching or kicking a child and a three-fold decrease in the use of abusive language towards children.

Economic status

Economically, most VSLA households recorded reduced vulnerability at endline. The average score for CPA 1, a composite measure of economic vulnerability, decreased significantly from baseline to endline. This decreased vulnerability was based partially on a modest shift in source of income, from casual labor and informal jobs to petty business, though about 50% of households were still reliant on very informal income generating activities. Median reported household monthly income increased by more than 50%, from about 28 USD at baseline to about 45 USD monthly at endline. Increased income was mirrored by increased ability to pay for basic needs, including food and shelter, health care, and education. At endline, 65% of VSLA-participating households reported being able to pay for these three types of basic needs in each of the last three months, up from 43% at baseline. In terms of food security, a substantial majority (74%) of VSLA households reported having two or more meals per day at endline, up from about 54% at baseline. There were also substantially fewer households at endline that reported having inadequate or no stable shelter.

Child and family well-being

On other well-being measures, the findings were similarly mostly positive. The proportion of households with all children attending school regularly more than doubled to 60%. There were substantial reductions in the proportion of respondents who said they had no one or only one person to approach for emotional or material support. Across the VSLA households, children reported improved enjoyment of education, social wellbeing, parent-child attachment, community belonging, emotional wellbeing, and safety between baseline and endline. Primary caregivers also recorded higher average scores on domains of family integration, reflecting greater comfort or confidence in these areas.

Child protection

Though the number of at-risk households receiving a cash transfer followed by participation in a VSLA was small, the proportion of families in this group reporting a child separation at endline was relatively high at 14% (n=5), much higher than the 3% average for at-risk households. Yet, the proportion of households reporting any child experience of physical or sexual abuse, neglect, discrimination, or involvement in child labor decreased substantially from baseline to endline. There were also declines in the proportion of caregivers reporting punching or kicking a child (58% to 14%) and a three-fold decrease in the use of abusive language towards children (53% to 33%).

Economic status

Economically, most households in the CT+VSLA group recorded reduced vulnerability at endline, with a reduction in the average score for CPA 1 of 35%. These families reported a modest shift in source of income, from casual labor and informal jobs, with 58% of households reporting petty business or a formal job at endline (up from 33% at baseline). Median reported monthly household incomes more than doubled among CT+VSLA households to 125,000 UGX (about 34 USD). Increased income translated into increased ability to pay for basic needs, including food and shelter, health care, and education, along with a 36-point reduction in the percentage of households *unable* to pay for these sets of expenses for any of the past three months. In terms of food security, 58% of households reported having two or more meals per day at endline, up from 28% at baseline. There was also a substantial reduction in the percentage of families with no stable shelter or shelter in need of major repairs, though about 44% of the group was still living in these types of inadequate shelters at endline.

Child and family well-being

This group was the only among the at-risk sample to record a decline in the proportion of households with all children attending school regularly, from 22% and 19%, though the proportion of households with no children attending school regularly also fell by more than half, to 17%. There were reductions in the proportion of respondents who said they had no one or just one person to approach for emotional or material support, and substantial increases in the proportion of respondents with two or more people in their social safety net. Children in CT+VSLA households reported improved enjoyment of education, social wellbeing, parent-child attachment, community belonging, emotional wellbeing, and safety, though their average scores at both baseline and endline were the lowest of at-risk households. Primary caregivers also recorded higher average scores across integration categories at endline.

Child protection

At 14% (n=6), the proportion of cash transfer recipient households that recorded a new child separation at endline was similar to the overall average for the reintegration sample. The proportion of households reporting any child experience of physical or sexual abuse decreased from baseline to endline, while self-reported rates of child labor and neglect increased slightly, to 30% and 36% respectively. On self-reported use of harsh discipline practices, there was a substantial decrease in the proportion of caregivers who reported punching or kicking a child (70% to 11%), while the use of abusive language towards children remained approximately the same (52% to 50%).

Economic status

Economically, most cash transfer recipient households showed modest change in vulnerability at endline. The average score for CPA 1 decreased 10%, but was still the highest across the reintegrating household sample. Cash transfer families reported some shifts to more reliable sources of income, though 59% of households were still reliant on very informal income generating activities at endline. Median reported monthly household incomes increased slightly, from 110,000 UGX to 125,000 UGX (31 USD to 35 USD), reducing the percentage of households earning less than 50,000 UGX to 9%. These changes in income translated into increases in ability to pay for basic needs, including food and shelter, health care, and education for at-risk households. At endline, 11% of households in this sample were *unable* to pay for these sets of expenses for all of the past three months, down from 34% at baseline. A majority of cash transfer households reported two or more meals per day at baseline (64%); this proportion increased to 75% at endline. Similarly, the proportion of households with safe and adequate shelters was relatively high at baseline (66%) and increased to 75% at endline.

Child and family well-being

On other well-being measures, the findings were mostly positive. The proportion of households with all children attending school regularly remained relatively stable at 25%, with another 36% reporting that at least half of their children attended school regularly (up from 21% at baseline). A smaller proportion of respondents reported having no one to approach for emotional or material support. Across this group of reintegrating families, children and caregivers reported improved social well-being, parent-child attachment, community belonging, emotional well-being, and safety between baseline and endline. Children also recorded improved scores on enjoyment of education, though these scores were relatively low at both time points given the relatively low rate of regular school attendance.

Child protection

The small group of reintegrating families that received community skills training reported 4 family-child separations (13%) at endline, slightly lower than the average for the FARE reintegration households. The proportion of households reporting any child experience of physical abuse or neglect decreased from baseline to endline, while self-reported rates of child labor increased slightly to 10%. Use of harsh discipline practices was reported by a smaller proportion of households at endline, though 40% of caregivers still indicated they had punched, hit, or kicked a child.

Economic status

Economically, reintegrating households in this group showed modest change in vulnerability at endline: the average score for CPA 1 decreased about 9% between baseline and endline. There was very little change in the primary source of income indicated by caregivers within this sample. Median reported monthly household incomes increased by 5,000 UGX (a little over 1 USD) to 110,000 UGX. With regard to ability to pay for basic needs, 37% of households at endline indicated ability to consistently cover the costs of food, water, shelter, health care, and education over the past three months, up from 24% at baseline. There was no change in the proportion of households with two or more meals per day (80%), but there were no households reporting going without a meal some days at endline. The most notable change with regard to shelter status was the decrease from 24% to 3% of families reporting no stable shelter or safe place to live.

Child and family well-being

The distribution of households according to children's regular school attendance remained relatively unchanged from baseline to endline. Only 30% of households reported that all children were attending school regularly at endline. The proportions of respondents who at endline said they had no one or only one person to approach for emotional support (47%) or material support (57%) had also changed little. Across the Community Skills reintegration group, children and caregivers recorded higher average scores on all measures of personal integration and well-being, reflecting greater comfort or confidence in these areas.

Child protection

The small group of households that received “Other ES” (only financial literacy and/or business skill training and coaching or apprenticeship) reported 2 (12%) family-child separations at endline. The proportion of households reporting physical abuse increased from 13% to 18%, while the percentage indicating child neglect more than doubled to 30%. Yet households reported declines in the use of harsh discipline practices, with 24% indicating the use of physical punishment or abusive language, down from 63% and 56%, respectively.

Economic status

Economically, reintegrating households in this group showed modest change in vulnerability at endline, with a 7% decrease in average score for CPA 1. At baseline over 80% of households were reliant on very informal income generating activities; this decreased to 63% at endline. This group recorded the lowest median monthly income of 90,000 UGX (25 USD) at baseline, but the highest median monthly income at endline of 150,000 UGX (42 USD). The change in median income was driven largely by a 9-point decrease in the percentage of households earning under 50,000 UGX and a 9-point increase in the percentage earning over 200,000 UGX. With regard to ability to pay for basic needs, the largest change was the reduction in the proportion of households *unable* to cover basic needs, from 31% to 18%. A substantial majority of households in this group reported having two or more meals per day at endline (70%), yet nearly a quarter of families (24%) reported having no meals on some days. The household shelter situation for Other ES families remained relatively stable, with 80% indicating adequate shelter at baseline and endline.

Child and family well-being

The proportion of households with all children attending school regularly increased to 65%, while there were no households at endline that recorded no children attending school regularly. At endline, a greater proportion of respondents said they had no one or only one person to approach for emotional support (47%) or material support (57%) than at baseline. Both children and caregivers in Other ES households recorded higher average scores on all domains of family integration at endline except on social well-being, for which there was a slight drop in average scores.

Households that did not receive an ES intervention made up about one-fifth of the FARE at-risk sample and over one-half of the reintegration sample at endline. Note that at baseline the No ES at-risk households accounted for about one-third of that sample. Nearly half of the at-risk No ES households were lost to follow-up, so the 63 included here provide limited (and likely skewed) representation of those households.

Child protection

The No ES families reported 1 (2%) family-child separation across at-risk households at endline and 17 (17%) among reintegrating households, representing lower and higher than average separations per sub-sample, respectively. At-risk households recorded declining rates of all child protection issues, with the exception of regular abuse of alcohol or drugs by an adult in front of a child, which remained at about 63% of households. Reintegration households recorded relatively stable rates of child labor (~7%) and neglect (~16%), and increases in the proportions of households reporting physical abuse (up to 11%) and child observance of adult drug or alcohol use (up to 16%). Caregivers in both at-risk and reintegrating households reported declines in the use of harsh discipline practices, except for a small uptick among at-risk households in the withholding of food as punishment (up from 3% to 5%).

Economic status

Economically, reintegrating households in the No ES group showed modest to moderate change in vulnerability at endline. The average score for CPA 1 decreased 7% for reintegrating households and by 18% for at-risk households. Neither the at-risk nor the reintegrating household samples showed much change in source of income; about half of all households were still reliant on informal income generating activities at endline, slightly less than at baseline. Median reported monthly household incomes nearly tripled among at-risk households to 150,000 UGX (42 USD), though the very low baseline value and the 20-point increase in the percentage of families earning over 200,000 UGX per month is perhaps due to poorer families dropping out of the sample. Among reintegrating households, the median reported monthly income *decreased* slightly, from 110,000 UGX to 100,000 UGX. This was the only reduction in income observed across the FARE samples. With regard to ability to pay for basic needs, a majority of at-risk households (64%) indicated they could cover costs for food, shelter, health care, and education over the past three months at baseline, and increased to 75% at endline. At-risk households also recorded a significant increase in food security, in terms of the proportion of households with two or more meals per day. Reintegrating households saw a greater increase in the proportion of households able to pay for basic needs than at-risk households, but starting from a much lower level, 33% at baseline to 59% at endline. A substantial majority of households in the reintegrating No ES group reported having two or more meals per day at baseline and this changed little at endline. The proportions of households with safe and adequate shelters increased from 58% to 68% for at-risk families and from 82% to 87% within the reintegration sample.

Child and family well-being

The proportion of households with all children attending school regularly more than doubled for at-risk households (from 21% to 48%) and increased slightly among reintegrating households (from 49% to 55%). There were reductions in the proportion of respondents who said they had no one to approach for emotional or material support, and substantial increases, for at-risk households, in the proportion of respondents with two or more people in their social safety net. Across the No ES at-risk and reintegration samples, children and caregivers recorded higher average scores on all measures of family integration and well-being, reflecting greater comfort or confidence in these areas.

Table 20. Summary of key indicators by ES activity

Improvements on key indicators at endline	At-risk HHs				Reintegrating HHs				
	All HHs	VSLA	CT+ VSLA	No ES	All HHs	CT	Comm Skills	Other ES	No ES
	(n=292)	(n=187)	(n=36)	(n=63)	(n=188)	(n=44)	(n=30)	(n=17)	(n=97)
Decrease in % HHs with child living outside family	✓*	✓	✓	✓	NA	NA	NA	NA	NA
Reduction in % HHs with reported child protection issues (reductions across all issues)^	✓	✓	✓	✓	✓	-	-	-	-
Reduction in % HHs reporting harsh discipline practices (reductions in all types)^	✓	✓	✓	-	✓	✓	✓	✓	-
Reduction in economic vulnerability (CPA1)	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓*
Reduction in % destitute HHs (Simple Tool)	✓*	✓*	✓*	✓*	✓*	✓	✓	-	✓
Reduction in % HHs likely to be living on <\$2/day PPP (PPI)	✓*	✓*	✓*	✓	-	-	-	-	-
Increase in median HH income	✓*	✓*	✓*	✓*	✓	✓	✓	✓	-
Reduction in % HHs with risky coping strategies	✓*	✓*	✓*	✓	✓	-	✓	-	-
Increase in % HHs with ability to cover all basic needs past 3 months	✓*	✓*	✓*	✓	✓*	✓*	✓	-	✓*
Increase in % HHs with 2+ meals/day	✓*	✓*	✓*	-	✓*	✓	-	✓	✓*
Increase in % HHs with adequate shelter	✓*	✓*	✓*	✓	✓*	✓*	✓	✓	✓*
Increase in % HHs with all children in school	✓*	✓*	-	✓	✓*	-	-	✓	✓*
Increase in % HHs with 2+ emotional supports	✓*	✓*	✓*	✓*	✓*	✓*	✓	-	✓*
Increase in % HHs with 2+ material supports	✓*	✓*	✓	✓*	✓*	✓*	✓	-	✓*
Improved child well-being/integration, all domains	✓*	✓*	✓	✓	✓*	✓	✓	-	✓*
Improved caregiver well-being/integration, all domains	✓*	✓*	✓*	✓*	✓*	✓	✓	-	✓

DISCUSSION

The FARE project provided an opportunity to pilot selected economic strengthening activities in conjunction with family strengthening and case management with families at risk of family-child separation and families in the process of reintegrating a separated child. The setting for the project, in and around slum areas near the capital city Kampala, and the focus of its reunification efforts on street-connected children and children in conflict with the law provided insights into the mobility and general busyness of urban households and to other types of challenges families in urban environments face. This context was also challenging for project implementation in terms of participant engagement and the ability to provide integrated family strengthening and economic strengthening activities. About one-third of at-risk households and half of reintegrating households did not receive any economic strengthening activities through the FARE project. The data collected on all participating households, however, provides information on changes in economic vulnerability, family well-being, and child protection concerns over the project period that highlight trends, which differed for at-risk and reintegrating households.

At-risk households

Among the at-risk households that received an economic strengthening activity (either VSLA or cash transfer plus VSLA), there were several signs of reduced economic vulnerability, as indicated by increased median monthly income, increased ability to pay for basic needs, and increased food security.⁷ On nearly all of these indicators, the magnitude of the improvements was greater for the more economically vulnerable CT+VSLA group. In most cases, this meant that the destitute households that received CT+VSLA were in a better position at endline than the VSLA group had been at baseline, while still trailing the VSLA group's general economic status at endline. Overall, the proportion of households with no children regularly attending school decreased by more than half across at-risk households, but there were differences between the ES groups. The VSLA group saw a significant increase in the percentage of households with all children regularly attending school, to 60% at endline, while the more vulnerable CT+VSLA group saw a slight decline on the same indicator, with only 19% of families reporting all children attending school regularly at endline.

With regard to child protection concerns, FARE at-risk households recorded considerable reductions across all types of child protection concerns, for both VSLA and CT+VSLA sub-groups, with particularly large reductions in reporting of child neglect, child labor, and repeated physical abuse, along with a decline in the reported use of harsh discipline practices. Though lower at endline, considerable rates of adult abuse of drugs/alcohol in front of children persisted across the two groups. The proportion of households with a child living outside of family care for any reason (including less concerning reasons like attending school or living with a relative) decreased for both VSLA and CT+VSLA samples. Half (5 of 10) of the child separations recorded at endline were among the CT+VSLA group. The 14% separation rate among the destitute CT+VSLA group was seven times higher than the VSLA group, perhaps explained by the destitute group's relatively higher vulnerability on a number of the indicators discussed above.

Reintegrating households

The situation of the reintegrating households in the FARE sample was more varied, reflecting the nature of a more disparate sample, assembled around households that were reunifying a child from the street or the

⁷ Note that the No ES group followed most of these trends, but given 50% loss to follow up among this sub-group, it is likely that the more vulnerable households dropped out, skewing the endline sample and making interpretation tenuous. We therefore do not discuss the No ES group here in the discussion.

remand system and not based primarily on economic vulnerability.⁸ The aggregate reintegration sample was less economically vulnerable than the at-risk sample at baseline, with a median monthly income of about USD 30 that increased only slightly at endline. The largest increases were seen in the Cash Transfer and Other ES groups. Despite these higher reported median incomes and generally high food security and shelter status, a relatively small proportion of reintegrating HHs reported consistent ability to pay for food and shelter, health care, and education (21% - 37% among reintegrating households receiving an economic strengthening activity, compared to 60% of reintegrating households with No ES and 65% of the aggregate at-risk sample), potentially reflecting income volatility. There was little change in primary source of income among these households, with casual labor and informal jobs continuing to account for the greatest percentage. Regular school attendance rates were also relatively static from baseline to endline: the percentage of households that recorded having all children attend school regularly increased slightly, from 43% to 45%, driven by increases in the Other ES and No ES groups. The proportion of Cash Transfer and Community Skills households with all children attending school regularly was low at baseline and fell slightly at endline to 25% and 30%, respectively.

With regard to child protection concerns, FARE reintegrating households recorded variable rates and directions of change. The proportion of households indicating use of harsh discipline practices declined generally, with relatively high rates of use of abusive language persistent at endline among the Cash Transfer and No ES sub-groups. Cash Transfer and Community Skills households reported slight increases in child labor; Cash Transfer and Other ES households recorded increases in child neglect; and more Other ES households (18%) also reported physical abuse of children at endline than at baseline. Child separation rates at endline (reflecting households reporting a child living outside of care for a concerning reason) were over 10% across all categories of reintegrating households, with the highest rate of 17% recorded among No ES households.

Limitations

The nature and the complexity of the issue of family-child separation, with multiple inter-connected drivers, coupled with the challenges of implementing a diverse set of activities with households experiencing a range of economic and family stressors, presented limitations for both the FARE project and for the research and learning activities that could be constructed around it. The main limitations of the findings presented in this report include:

- *A large number of households that did not receive or participate in economic strengthening activities.* The FARE project identified five main challenges in reaching all intended beneficiaries with economic strengthening activities: busy and highly mobile family members with little time for project activities; households that shifted residence often; time lags between baseline data collection, development of household plans, and activity implementation; inaccessibility of group-based interventions to scattered households; and low motivation to participate (due to severe destitution; high expectations of direct material support; pressures of urban living; impact on daily routines) or perceived stigma (related to street-connected children). We have attempted, for those No ES households that remained connected to FARE, to understand whether and how they differed from ES-receiving households. Generally, the households that did not participate in an ES activity were slightly less economically vulnerable, so this group cannot be confidently used as a natural experimental control.

⁸ Note that the half of the reintegration sample that did not receive economic strengthening activities were slightly less economically vulnerable at baseline on several measures (and may have had less need for economic strengthening activities), which potentially shifts the average for the aggregate sample.

- *An unequal distribution of households across the categories of economic strengthening activities.* For at-risk households, this was due to the limited availability of cash transfer funds. For the reintegration households, the scattered nature of households and the limited number of apprenticeships and cash transfers available led to small samples in those groups. Community skills was added as an intervention late in the project to try to provide an economic strengthening activity for reintegrating households. This unequal distribution makes it more difficult to compare households across categories, and for the smaller samples, limits tests of statistical significance.
- *An unequal duration of interventions and timing of observation.* The implementation of household-level activities was dictated by household development plans specific to each family, and to the availability of the project case managers and economic strengthening facilitators. For example, as mentioned, the Community Skills activity was added very close to endline, so there was likely little time for any results of that activity to become evident. These differences in dosage of activities limit interpretation of comparative analyses.
- *A lack of control groups.* Given resource constraints – and the changing nature of the distribution of respondents – the research design did not include control households, which could have enabled assessment of impact of the (different) economic strengthening activities. The findings here are therefore only descriptive.
- *No estimates of the background rate of family-child separation in Uganda against which to compare observed rates of separation in the FARE sample.* The lack of background estimates of separation contributed to the limitations of the research design, as it was not possible to perform power calculations on the primary outcome without a good sense of the expected rate of separation in the population. This also limits how we can interpret findings on rates of separation among different sub-groups in the FARE sample.

Nonetheless, interpreted with these limitations in mind, the findings in this report provide comprehensive descriptive data on changes over time in key indicators related to drivers of family-child separation among an urban population of vulnerable households receiving family strengthening activities and economic strengthening activities. From these data, we may draw some insights to guide future programming.

Among urban households at risk of family-child separation that participated in group savings (VSLA), reductions in economic vulnerability were accompanied by reductions in the proportion of households with out-of-school youth, reductions in reported child protection issues and use of harsh discipline practices, and improvements in caregiver access to emotional and material support, all of which are supportive of family unity. These findings highlight the integrated nature of programming, as many caregivers who participated in VSLA also participated in parenting skills training, and in some cases, VSLA served as the platform for parenting skills groups, which likely contributed to improvement on child protection issues.

The most economically vulnerable (destitute) households at risk of family-child separation that received a limited, unconditional cash transfer followed by participation in a VSLA showed similar improvements in economic vulnerability, and reductions in child protection issues and use of harsh discipline practices. For most measures, however, the relative vulnerability of the destitute households persisted; endline values for this group remained below average endline values for the VSLA-only group. Further, among this more vulnerable group, improvements to children's regular school attendance were limited, and the child separation rate, at 14%, was seven times higher than that of the households that participated only in VSLA, suggesting that a longer period of implementation and/or specific support for school fees may be important for further stabilizing destitute urban households. Additionally, adult alcohol use in front of children persisted among a high percentage of households, presenting an area for emphasis and development.

Among reintegrating households, relatively high incomes and ability to pay, coupled with relatively good shelter and food security (at baseline, with little change at endline), suggest economic vulnerability may have been less of a primary force driving separation. Across the groups of reintegrating households, issues with child labor, neglect, and physical abuse persisted, as did fairly low levels of regular school attendance. The average separation rate across reintegrating families was high (15%) relative to at-risk households, and highest among households that did not receive/participate in economic strengthening activities. So while reintegrating households that participated in economic strengthening activities did record modest improvements in many of the areas of concern for family-child separation, it may be that urban families with a child reunified from the streets or remand centers require more substantial case management and family strengthening follow-up, with economic strengthening activities playing a supportive and/or secondary role.

CONCLUSION

The experience of the at-risk households that participated in FARE, as assessed and documented in this report, lends credence to the theory that reducing economic stress in the household may contribute to better general family well-being, thus reducing drivers of family-child separation. While we cannot tease out attribution of specific outcomes to specific activities, the general improvement of FARE at-risk households across indicators of child protection, economic status, and child and caregiver well-being for most categories of participants suggests that economic strengthening activities do have a role to play in preventing family separation. These trends were less clear for the urban households reintegrating a child from the streets or the juvenile justice system; among these households economic vulnerability may be secondary to family dynamics, caregiver behavior, and social conditions (e.g., stigma). Both of these findings reinforce the necessity of determining whether and which economic strengthening activities may best address a family's immediate and longer-term needs in support of keeping children in family care.

Annex I: FARE Project Theory of Change

The Theory of Change considered that if families were provided a combination of economic and family strengthening interventions, the drivers of child family separation would be reduced; families would become more resilient to shocks and would be able to foster a healthy environment for children to remain in family care.

FARE identified two main pathways to enhance family resilience:

- a) the relationships and environment within the family
- b) the economic stability of the family.

Separate hypotheses were generated for reintegration and prevention of separation.

The **reintegration hypothesis** was that families that are more resilient to shocks and have positive environment of relationships and care for children are better equipped to receive separated children back home and enable them to stay. The assumption was that children being prepared for reunification would be cared for in child care institutions using appropriate SOPs and therefore the children would benefit from strong case management, attachment therapy, and best practices for transitional care. Children's preparedness to return to their families would be ensured by addressing children's basic needs (such as food, clothing, medical and shelter) at the center and children's active engagement in various activities ranging from life skills training to counselling therapy.

The **prevention hypothesis** was that economic strengthening interventions take stress off household resources to allow healthier family relationships and better provision of the necessary care for children to prevent child-family separation.

The interaction of both the "soft" family strengthening activities—parenting education and counselling, life-skills training, community dialogues—and the concrete access to increased financial resources and skills via economic strengthening activities, would bolster the family unit, both preventing separation and enabling durable reintegration.

Source: FARE End-of-project Report (AVSI Foundation, 2018)

Annex II. Household Vulnerability Assessment Tool (HVAT)

MINISTRY OF GENDER, LABOUR AND SOCIAL DEVELOPMENT

HOUSEHOLD VULNERABILITY ASSESSMENT TOOL (HVAT) – Adapted for FARE Project

The Household Vulnerability Assessment tool (HVAT) is for assessment of families selected through the vulnerability prioritization process. This adapted tool helps to obtain in-depth baseline information about a family's level of vulnerability to family-child separation, which will be used for monitoring progression of FARE beneficiary families' vulnerability to family-child separation. The tool should be used with only households identified and prioritized using the Household Vulnerability Prioritization Tool (HVPT), and it should be administered only to families who will be supported. The tool should be applied after enrolment of families, at the end of 6 months, at the end of 12 month and at the end of 18 months or end of FARE Project.

SECTION 0: BACKGROUND INFORMATION

INSTRUCTIONS: Please administer this tool to the head of household (spouse or child in case of a child headed household). Provide background information for the household. Indicate all the required information on the members of the household, the required contact details and the Temporary HH Number assigned by A FARE project staff as indicated on the Household Vulnerability Prioritization Tool (HVPT). For each of the vulnerability categories, tick under Yes or No or Not Applicable (NA) as applicable. For Sex, indicate whether Male (M) or Female (F). For immunization and birth registration, check for immunization and birth registration certificates; while for date of birth, indicate the date, month and year. In the event that the two certificates are not available, take the information that is given. If the dates are not known, write not known. For HIV status, indicate unique codes of Positive (+), Negative (-) or Don't Know (DK).

SECTION II: HOUSEHOLD INFORMATION

INSTRUCTION: Ask each question and circle the appropriate response option. After circling the response, please write in the corresponding score to the far right hand column (labeled SCORE). At the end of each Core Program Area (CPA), add the scores for all questions and write them down under "CPA TOTAL" row.

Finally, **score all questions except 7.0**. Add up all relevant scores within each CPA and enter them under CPA Total. Compute the average SCORE for the Household by considering the scores under the different CPAs and indicate them in the table at the end accordingly.

SECTION 0: BACKGROUND INFORMATION

0.1 District	0.2 Sub-county/division/town council
0.3 Date of interview	0.4 Name and mobile contact number of HH head
0.5 Parish/ward	0.6 Village/zone
0.7 Name of IP	0.8 Name of interviewer
0.9 Name & contact of sub-county CDO	0.10 HH Number
0.10a Has HH moved since start of project? 1. No 2. Yes (if so, 0.10b)	0.10b If yes, how many times? [Enter number] _____

0.11 Age of HH head	0.13 Phase of HVAT administration 1. 1 st 2. 2 nd 3. 3 rd 4. 4 th	0.14 Sex of HH head 1. Male 2. Female
0.12 Number of non-biological children to the caregiver/head of HH		

0.15 Marital status of HH head 1. Single 2. Married/cohabiting 3. Widowed 4. Separated/divorced 5. NA (if child)	0.16 Education level of HH head 1. None 2. Primary 3. Secondary 4. Tertiary	0.17 Number of people in the HH by age group		
		Age group (yrs)	Male	Female
		Under 1		
		1-4		
		5-9		
		10-14		
		15-17		
		18-24		
25+				
0.18 If HH is reintegrating a child through FARE, is child still resident in HH? (skip if prevention HH) 1. Yes 2. No, explain If NO: Is child still connected to the HH? 1. Yes 2. No		0.19 Was there any change on the HH roster that indicates a child is missing from the HH? 1. Yes 2. No If Yes, explain:		

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Section 0.1 Economic Classification and Project Activities

Project Activities Roster (to be completed by case manager)

Project Activities Roster (to be completed by case manager)		
a) HH economic classification assigned at baseline	Destitute	Struggling
b) Received cash transfer	Yes	No
<i>If yes:</i> a1. Number of cash transfers		
a2. Mode of CT payment		
a3. Total amount of CTs received		
c) Trained in SPM	Yes	No
d) Trained on VSLA methodology / group dynamic and management	Yes	No
e) Participated in FARE VSLA group	Yes	No
f) Participated in community skills (small skill production skills) training	Yes	No
g) Received other form of economic support (school fees, IGA toolkit, etc.)	Yes	No
<i>If yes: Which kind?</i>		
h) Index child participated in apprenticeship	Yes	No
i) Other child in HH participated in apprenticeship	Yes	No
j) Index child participated in life skills for adolescents	Yes	No
k) Other child in HH participated in life skills for adolescents	Yes	No
l) Participated in parenting skills training	Yes	No
m) Participated in community dialogue(s)	Yes	No
n) Participated in interactive learning sessions for adolescents	Yes	No
o) How many home visits to the home have been received by household July-Dec 2017? (write number in space to the right)		
p) How many home visits to the home have been received by household Jan-Jun 2017? (write number in space to the right)		
q) Types of home visit activities provided/completed (please check all that apply)	HDP/CDP follow up	
	Individual counseling	
	Family dialogues	

Household summary

0.20 Name of child	0.21 Sex (M/F)	0.22 Age	0.23 Date of birth (DD/MM/YY)	0.24 Biological child to caregiver/HH head?	0.25 Living in HH 6 of 12 last months?	0.26 Household member? Apply PPI rules	0.27 Out of school (Yes/No/NA)	0.28 Enrolled in school (Yes/No/NA)	0.29 Child whose 1 or both biological parents are dead (Orphan) (Yes/No/DK)	0.30 Disabled (Yes/No)	0.31 Chronically III (Yes/No)	0.32 Immunized (Yes/No/DK)	0.33 HIV Status (+/-?DK)	0.34 In HIV Care (Yes/No/NA)	0.35 Birth Registration. (Yes/No)
1.															
2.															
3.															
4.															
5.															
6.															
7.															
8.															
9.															
Name of adult (18 +)															
1.															
2.															
3.															
4.															
5.															
6.															
7.															
8.															
9.															

Total people: _____ # of children 5-17: _____ # of children 5-17 currently in school: _____

Total HH members (PPI criteria): _____ # of children 6-12 currently in school: _____

SECTION II: HOUSEHOLD (HH) ASSESSMENT

CPA I: ECONOMIC STRENGTHENING

Questions and Responses										SCORE	
I.1	Who pays for most of the HH expenses?										
Option	a) Child (6-17 years)	b) Grand/elderly parent	c) Relative	d) Mother	e) Father						
Score	4	3	2	1	0						
I.2	What is the MAIN source of household income?										
Option	a) None	b) Remittances Pension, gratuity, donations	c) Casual laborer	d) Informal job / employment	e) Peasantry farming / Hiring out labour on other farms/ garden	f) Petty businesses	g) Formal business	h) Commercial farming	i) Formal job/ employment		
Score	4	3	2	2	2	1	0	0	0		
I.3	What is the current monthly HH income? (express amount in Uganda Shillings, then score according to range)										
_____ Uganda Shillings											
Option	a) Less than 50,000	b) 50,000-100,000	c) 100,000-150,000	d) 150,000-200,000	e) Above 200,000						
Score	4	3	2	1	0						
I.3A	How much money does the household have in savings?										
_____ Uganda Shillings											
Option	a) Less than 30,000	b) 30,000-60,000	c) 60,000-90,000	d) 90,000 – 120,000	e) Above 120,000						
Score	4	3	2	1	0						
I.4	Do these statements apply to this HH? (Yes/No)										
								Yes	No		
	1)	Any member of the HH owns an electronic gadget (radio, phone, TV)									
	2)	Any member of the HH has a functional transport means (bicycle, motor cycle, boat)									
	3)	At least one member of the HH has vocational/apprenticeship/professional skills									
	4)	At least one member of the HH has formal employment, is self-employed, or has a business									
	5)	At least one member of the HH belongs to any financial savings and lending group									
	6)	HH has access to land for agriculture									
Option	a) If 4 or more are No	b) If 3 are No	c) If 2 are No	d) If 1 is No	e) If more than 4 are yes or NA						
Score	4	3	2	1	0						
I.5A.	In how many of the last three months have you consistently been able to pay for the following items without having to sell HH productive assets like land, bicycle or borrowing at very high rates of interest (more than 30%)?										
Number of months (0 – 3)											
	1) Food, Shelter, and Water										
	2) Health care										
	3) Education										
Add total months (1+2+3) →											
Option	a) Total = 9	b) Total = 8	c) Total = 7	d) Total = 4-6	e) Total = 0-3						
Score	0	1	2	3	4						

Questions and Responses			SCORE
1.5B	If you had an unexpected shock, like a death in the family, happen tomorrow, how would you handle the expenses? (tick all that apply)		
	Option (do not read the options below, wait for the response and then tick those that correspond)	Tick all that apply	Circle highest score
	1) Pay with cash on hand/savings		0
	2) Seek contributions/gifts from friends, relatives, community members church help etc		1
	3) Request help from a charitable organization, CBO, NGO		1
	4) Borrow from a friend or relative or savings group and pay back later		1
	5) Look for another source of income near my home		1
	6) Reduce household spending a little		2
	7) Reduce household spending a lot		3
	8) Sell small livestock, household goods or items used in the household		3
	9) Migrate for work		4
	10) Borrow from moneylender at high interest		4
	11) Sell bicycle, land, tools or other items that help produce income		4
	12) Break up the household—send children to others to care for		4
	13) Go without food		4
	14) Engage in transactional sex or illegal activities		4
Score			
CPA 1 TOTAL:			

CPA 2: FOOD SECURITY AND NUTRITION						
Questions and Responses						SCORE
2.1.	Over the past 12 months, what has been the MAIN source of food consumed by your HH?					
Option	a) Donated	b) Given in return for work only	c) Bought from the market	d) Home grown		
Score	4	2	1	0		
2.2.	What does the family usually eat? (at least 3 times a week)				Yes	No
	1) Energy foods; potatoes, banana, oils, posho, millet, rice, maize, bread, cassava					
	2) Body building foods; beans, meat, soya, peas, milk, eggs, chicken, fish					
	3) Protective and regulative foods; greens, tomatoes, oranges, pawpaw, mangoes, pineapples					
Option	a) None	b) One food group	c) Two food groups	d) All food groups		
Score	4	3	1	0		
2.3.	How many meals does the HH have in a day?					
Option	a) Some days no meal	b) One meal	c) 2 meals per day	d) 3 or more meals per day		
Score	4	3	1	0		
CPA 2 TOTAL:						

CPA 3: HEALTH, WATER, SANITATION AND SHELTER

Questions and Responses		Yes	No	N/A	SCORE
3.1	Do the following apply to this HH? Indicate (Yes/No) (observe for yourself where applicable)				
	1) Does the HH have access to safe water within 30 minutes (half an hour) or harvests rain water for domestic use?				
	2) Does the HH have a clean compound ?				
	3) Does the HH have access to a public health facility within 5 kilometers ?				
	4) Does the HH have a drying rack for HH utensils ?				
	5) Does the HH have a garbage pit or dust bin?				
	6) Does the HH have a separate house for animals?				
	7) Does the HH have clean water and soap for hand washing ?				
	8) Do all HH members sleep under a mosquito net?				
Option	a) If 4 or more are No	b) If 3 are No	c) If 2 are No	d) If 1 is No	e) If all are Yes or N/A
Score	4	3	2	1	0
3.2	Does the caregiver know the HIV status of children in the HH? If yes, how many are known?				
Option	a) None known	b) Less than 50% (less than half) of the children's status known	c) 50% or more (more than half) of the children's status known	d) Yes, all known	
Score	4	3	2	0	
3.3	Are all eligible children who are known to be HIV positive and or have TB on treatment				
Option	a) None of the children on care or treatment	b) Less than 50% (less than half of children) are on care or treatment	c) 50% (half of children) are on care or treatment	d) All are on care or treatment	e) No eligible children known to be HIV positive or have TB
Score	3	2	0	0	
3.4	Does the household have a stable shelter that is adequate, safe and dry (observe yourself)				
Option	a) No stable shelter, adequate or safe place to live	b) Shelter is not adequate, needs major repairs	c) Shelter needs some repairs but is fairly adequate, safe and dry	d) Shelter is safe, adequate and dry	
Score	4	3	1	0	
3.5	What is the type of a latrine/toilet facility used by members of your HH? (observe yourself or ask if necessary)				
Option	a) Bush/None	b) Public toilet for pay	c) Private needs some repair/risky state	d) Private, but shared by more than one HH	e) Safe, adequate and dry
Score	4	3	2	1	0
CPA 3 TOTAL:					

CPA 4: EDUCATION

Questions and Responses					SCORE
4.1	How many children aged 5-17 years in this HH were not going to school or missed school regularly during the last term of 2017?				
Option	a) No children attend regularly	b) Less than 50% (less than half) attend school regularly	c) 50% or more (more than half) attends school regularly	d) All attend school regularly	e) Children aged under 5 only
Score	12	9	4	0	0
CPA 4 TOTAL:					

CPA 5: PSYCHOSOCIAL SUPPORT AND BASIC CARE						
	Questions and Responses					SCORE
5.1	In the past 6 months (STATE MONTH:.....), how often has someone in your household felt so troubled that it was necessary to consult a spiritual, faith or traditional healer, counselor or health worker?					
Option	a) More than 5 times	b) 3-4 times	c) 2 times	d) Once	e) Never	
Score	4	2	2	1	0	
5.2	Are there any children in this HH who are withdrawn or consistently sad, unhappy or depressed, not able to participate in daily activities including playing with friends and family? (Yes/No) If yes, how many?					
Option	a) All children	b) Less than 50% (less than half)	c) 50% or more (more than a half)	d) None		
Score	4	3	2	0		
5.2A	In times of need, who can you approach outside the household for emotional support? (count those mentioned)					
Option	a) Nobody	b) 1 person	c) 2 people	d) 3 or more people		
Score	8	4	1	0		
5.2B	In times of need, who can you approach outside the household for material support, such as food or money? (count those mentioned)					
Option	a) Nobody	b) 1 person	c) 2 people	d) 3 or more people		
Score	4	3	1	0		
CPA 5 TOTAL:						

CPA 6: CHILD PROTECTION AND LEGAL SUPPORT						
	Questions and Responses					SCORE
6.1	What would you do if any of your children experienced or became a victim of child abuse or violence?					
Option	a) Nothing/negotiate with offender	b) Talk to neighbor/family only	c) Report to LC/Police/Probation, court, child protection committee, CDO, Human rights office, CSO, para social worker and VHT			
Score	4	1	0			
6.1A	Do all children in this household have a birth certificate? (Yes/No) If no, how many do have a certificate?					
Option		a) No, Less than 50% of children have a birth certificate (0-49%)	b) No, 50% or more of children have a birth certificate	c) Yes, All children		
Score		4	2	0		
6.1B	In the past three months, have you or another caregiver used the following method of discipline with any child in your house?				Yes	No
	1) Punched, kicked or hit a child with any object					
	2) Withheld a meal to punish a child					
	3) Used abusive words/language toward the child					
Option	a) If two or more of the methods are checked		b) If at least one of the methods is checked		c) If all No	
Score	8		4		0	
6.1C	Are there any children of this household, under 18 years, who are not currently living here or have not lived with you at some point during the past 6 months?				Yes	No
6.1D	If yes, why are they not living in the household?					
Option	a) If the child went to work/for a job, ran or was chased away, or caregiver doesn't know where the child is	b) If the child does not like staying in this house	c) If the child is living with relative because family cannot support him	d) If the reason is child went to school		
Score	4	3	2	0		

Questions and Responses					SCORE		
6.2A	Since the last assessment (STATE MONTH:), has any child in the HH had the following happen to them, in or outside of the HH? [Ask "In the last 12 months" at baseline and "Since last assessment" on follow-ups] [Note: if you see an obvious issue of abuse, or you already know about it, then indicate yes and follow appropriate reporting.] Check Yes/No			1) Repeated physical abuse	Yes	No	
				2) Involved in child labour			
				3) Sexually abused, defiled, raped, forced into sex			
				4) Stigmatized/discriminated due to illness, disability or otherwise			
				5) Neglected	0		
				6) Been in conflict with the law			
				7) Child abused alcohol or drugs	0		
				8) Witnessed regular adult abuse of alcohol or drugs	0		
Option	a) If 4 or more are Yes	b) If 3 are Yes	c) If 2 are Yes	d) If 1 is Yes	e) If all are No		
Score	20	16	12	8	0		
CPA 6 TOTAL:							

[PLEASE DO NOT SCORE SECTION 7]

Questions and Responses	
7.0	In the last 6 months, has the household purchased any of the following assets (tick all that apply):
	Tick if yes
a) House (to live in)	
b) Residential plot	
c) Household items (TVs, radios, jewelry, furniture, clothing etc.)	
d) Agricultural land	
e) Business capital (tools and equipment)	
f) Rental property	
g) Other _____	

Thank you for your time!

To be completed later... Core Program Area	Maximum possible score (A)	HH Performance per CPA			Priority Action
		CPA Score (B)	Percent CPA Score (C=B/A*100)	CPA Rank	
1. Economic strengthening	28				
2. Food and nutrition security	12				
3. Health, water, sanitation and shelter	20				
4. Education	12				
5. Psychosocial support/basic care	20				
6. Child protection and legal support	40				
HH TOTAL SCORE:	132				

Economic vulnerability classifications (reference CPA I percent score in C): Can Graduate: 0-24%, Slightly Vulnerable: 25-49%, Moderately Vulnerable: 50-74% and Critically Vulnerable: 75-100%

Economic vulnerability classification for this household: _____

Annex III. Progress Out of Poverty Index (PPI)

PPI ® for Uganda 2012 Annexure to FSVI Household Tool 6.0

Important: A PPI score must be converted into a poverty likelihood using the PPI Look-Up Table.

Indicators	Responses	Score
1. How many members does the household have?	A. Nine or more	0
	B. Eight	3
	C. Seven	4
	D. Five or Six	6
	E. Four	8
	F. Three	12
	G. Two	21
	H. One	28
2. Are all household members age 6 to 12 currently in school?	A. No	0
	B. Yes	2
	C. No one ages 6 to 12	5
3. Can the (oldest) female head/spouse read and write with understanding in any language?	A. No	0
	B. No female head/spouse	0
	C. Yes	3
4. What type of material is mainly used for construction of the wall of the dwelling?	A. Unburnt bricks with mud, mud and poles, or other	0
	B. Unburnt bricks with cements, wood, tin/iron sheets, concrete/stones, burnt stabilized bricks, or cement blocks	4
5. What type of material is mainly used for construction of the roof of the dwelling?	C. Thatch, or tins	0
	D. Iron sheets, concrete, tiles, asbestos, or other	5
6. What source of energy does the household mainly use for cooking?	A. Firewood, cow dung, or grass (reeds)	0
	B. Charcoal, paraffin stove, gas, biogas, electricity (regardless of source), or other	6
7. What type of toilet facility does the household mainly use?	A. No facility/bush/polythene bags/bucket, etc. or other	0
	B. Uncovered pit latrine (with or without slab), Ecosan (compost toilet), or covered pit latrine without slab	4
	C. Covered pit latrine with slab	6
	D. VIP latrine, or flush toilet	11
8. How many mobile phones do members of your household own?	A. None	0
	B. One	7
	C. Two	12
	D. Three or more	22
9. Does any member of your household own a radio?	A. Yes	0
	B. No	7
10. Does every member of your household have at least one pair of shoes?	A. No	0
	B. Yes	9
	Total Score:	

Annex IV. Child Integration Status Tool

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Child's ID:	Child's name:	Age:	Sex: 1. Male 2. Female
Assessment Date: ___/___/___ Mo/Day/Yr	Phase of Assessment: Baseline <input type="checkbox"/> Midline <input type="checkbox"/> End-line <input type="checkbox"/>		
Social worker's name:			

To a reintegrated child: I would like you to tell me a bit about how you're doing now that you are living at home again. We want to ensure that we're supporting you in the best way possible and that we can learn about the transition which we know can be challenging.

To a child in vulnerable family: I would like you to tell me a bit about how you're doing living at home. We want to ensure that we're supporting you in the best way possible.

To all children: I'm going to ask you to tell me about an area of your life and then I will ask you if you agree or disagree with a related statement. I'd then like you to tell me if you agree or disagree a lot or a little. This will create a score on a scale from 1 to 4. You can look at this scale if it helps (show coloured version of the scales).

No, I disagree		Yes, I agree	
1 = I strongly disagree	2 = I disagree a bit	3 = I agree somewhat	4 = I strongly agree
1 = this is never true of me	2 = this isn't true of me most of the time	3 = this is true of me some of the time	4 = this is true about me nearly all of the time

We can then plot each area on a star so you can see how you are doing, and then we can discuss further about how we might be able to help you and your caregiver. All the information you share will remain confidential. We will use your scores to help us monitor our support to you, but it will always be anonymous.

Are you happy to continue? Yes No

1. Enjoyment of education					
Are you currently attending school?			Yes No (if No mark all below as 1)		
If no, tell me more about that (Probes: What is it that is stopping you from attending school)					
If yes, tell me about your school? (Probes: Can you describe your school? How are the teachers? What have you been learning about?)					
How would rank yourself on the following statements...					
* A.	I care about school	1	2	3	4
* B.	I enjoy learning.	1	2	3	4
* C.	My school cares about children and encourages us.	1	2	3	4
* D.	My school enforces rules fairly.	1	2	3	4
* E.	I am eager to do well in school and other activities.	1	2	3	4
				Total	/20

2. Social wellbeing					
Tell me about the people you spend time with at home? (Probes: Which friends do you play with? What things do you like to do with your friends? Who helps you if you have a problem?)					
How would rank yourself on the following statements...					
*	A. I build positive friendships with other people.	1	2	3	4
*	B. I resolve conflicts without anyone getting hurt.	1	2	3	4
	C. I have someone in my life to help with daily chores if I am sick.	1	2	3	4
	D. I have someone in my life to do something enjoyable with.	1	2	3	4
*	E. I have friends who set good examples for me	1	2	3	4
				Total	/20
3. Parent-child attachment					
Tell me about your relationship with your parent/s (probes: What do you do with your parent/s? How do you find talking with your parent/s/?)					
How would rank yourself on the following statements...					
*	A. I spend time with my parent(s) doing things together in a way that I enjoy.	1	2	3	4
*	B. My family gives me love and support.	1	2	3	4
*	C. My parent(s) are good at talking with me about things that matter.	1	2	3	4
*	D. My family knows where I am and what I am doing.	1	2	3	4
	E. I am comfortable sharing my thoughts and feelings with my parent(s)	1	2	3	4
				Total	/20
4. Community Belonging					
Tell me about your community? (Probes: Who are your neighbours? What groups in your community are you part of? What do your neighbours ask you and your friends to help with?)					
How would rank yourself on the following statements...					
*	A. I have good neighbours who care about me.	1	2	3	4
*	B. I am helping to make my community a better place.	1	2	3	4
*	C. I am involved in a church or mosque, or other community groups.	1	2	3	4
*	D. My community includes me and gives me useful roles and responsibilities.	1	2	3	4
*	E. I think it is important to help other people in my community.	1	2	3	4
				Total	/20
5. Emotional wellbeing					
Tell me about how you feel about yourself (How would you describe yourself? What do you see in your future?)					
How would rank yourself on the following statements...					
*	A. I feel good about myself.	1	2	3	4
*	B. I feel valued and appreciated by others.	1	2	3	4
*	C. I feel good about my future.	1	2	3	4
*	D. I find positive ways to deal with things that are hard in my life.	1	2	3	4
*	E. I feel in control of my life and future.	1	2	3	4
				Total	/20

6. Child protection

Tell me about how safe you feel (Probes: How safe do you feel? Do you have any worries about your/your child's safety? Have you /your child been hurt and, if so, how?)

How would rank yourself on the following statements...

* A. I feel safe at home.	1	2	3	4
* B. I feel safe at school.	1	2	3	4
* C. I have a safe neighbourhood.	1	2	3	4
D. I have someone in my life to turn to for suggestions about how to deal with a personal problem	1	2	3	4
* E. I say no to things that are dangerous or unhealthy.	1	2	3	4
	Total			/20

Integration Status star and action plan – child

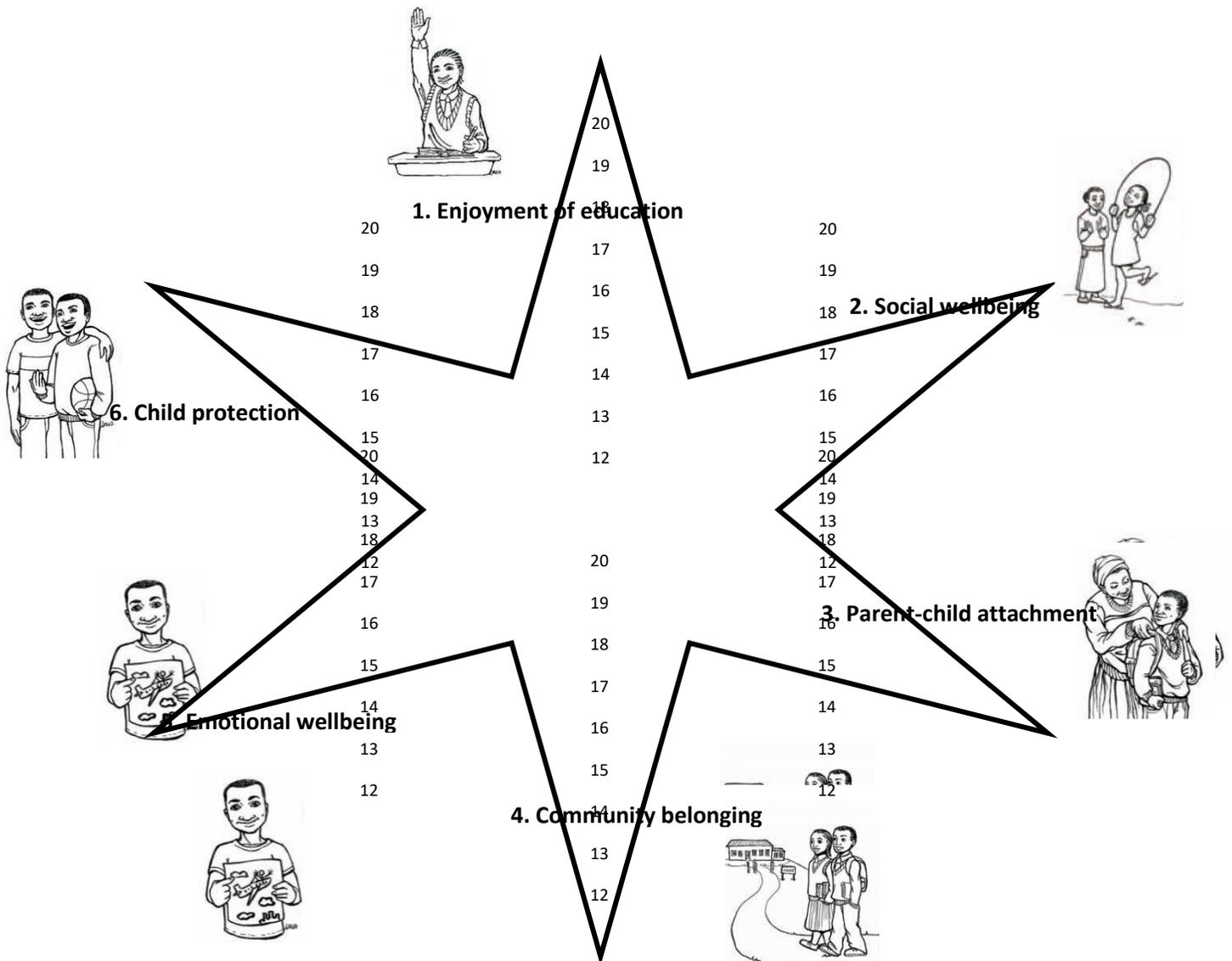
Child's ID	Child's name
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Plot all the scores on the relevant points of the star and join together with line. Check with the child that this represents how they are feeling about being back at home at the moment.

Use a different colour pen to mark points and lines for different dates. This will aid comparison over time.

Date 1:	Colour 1:
Date 2:	Colour 2:

Date 3:	Colour 3:
Date 4:	Colour 4:



Use the results and discussions about the star to build an action plan together.

Date 1:	Social worker's name:
<p>What are the key concerns? What areas have changed or stayed the same? Referring to your notes above and in discussion with the child about the star note down the key progresses and concerns. In particular consider any scores of below 9 on the star above.</p>	
<p>Action plan In discussion with the child make suggestions for future actions to address any outstanding issues. These could be actions by child, caregiver and project, or need for referral.</p>	
Date 2:	Social worker's name:
<p>What are the key concerns? What areas have changed or stayed the same? Referring to your notes above and in discussion with the child about the star note down the key progresses and concerns. In particular consider any scores of below 9 on the star above.</p>	
<p>Action plan In discussion with the child make suggestions for future actions to address any outstanding issues. These could be actions by child, caregiver and project, or need for referral.</p>	
Date 3:	Social worker's name:
<p>What are the key concerns? What areas have changed or stayed the same? Referring to your notes above and in discussion with the child about the star note down the key progresses and concerns. In particular consider any scores of below 9 on the star above.</p>	
<p>Action plan In discussion with the child make suggestions for future actions to address any outstanding issues. These could be actions by child, caregiver and project, or need for referral.</p>	
Date 4:	Social worker's name:
<p>What are the key concerns? What areas have changed or stayed the same? Referring to your notes above and in discussion with the child about the star note down the key progresses and concerns. In particular consider any scores of below 9 on the star above.</p>	
<p>Action plan In discussion with the child make suggestions for future actions to address any outstanding issues. These could be actions by child, caregiver and project, or need for referral.</p>	

Annex V. Caregiver Integration Status Tool

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Caregiver's ID:	Caregiver's name:	Age:	Sex: 1. Male 2. Female
Relationship of caregiver to the index child	Father <input type="checkbox"/> Mother <input type="checkbox"/> Grandmother or father <input type="checkbox"/> Stepmother or father <input type="checkbox"/> Uncle or Aunt <input type="checkbox"/> Neighbour <input type="checkbox"/> Child headed <input type="checkbox"/> Others specify <input type="checkbox"/> ; _____		
Assessment Date: ___/___/___ Mo/Day/Yr	Phase of Assessment: Baseline <input type="checkbox"/> Midline <input type="checkbox"/> End-line <input type="checkbox"/>		
Social worker's name:			

To caregiver of reintegrated child: I would like you to tell me a bit about how you're doing now that your child is living at home. We want to ensure that we're supporting you in the best way possible and that we can learn about the transition which we know can be challenging. We would like you to think about your reintegrating child in particular as you answer.

To caregiver of vulnerable children: I would like you to tell me a bit about how you're doing in your family life. We want to ensure that we're supporting you in the best way possible. Please consider all the children in your care as you answer.

To all caregivers: I'm going to ask you to tell me about an area of your life and then I will ask you if you agree or disagree with a related statement. I'd then like you to tell me if you agree or disagree a lot or a little. This will create a score on a scale from 1 to 4. You can look at this scale if it helps (show coloured version of the scales).

No, I disagree		Yes, I agree	
1 = I strongly disagree	2 = I disagree a bit	3 = I agree somewhat	4 = I strongly agree
1 = this is never true of me	2 = this isn't true of me most of the time	3 = this is true of me some of the time	4 = this is true about me nearly all of the time

We can then plot each area on a star so you can see how you are doing, and then we can discuss further about how we might be able to help you and your child. All the information you share will remain confidential. We will use your scores to help us monitor our support to you, but it will always be anonymous.

Are you happy to continue? Yes No

1. Social wellbeing					
Tell me about the people you spend time with at home? (Probes: Which friends do you talk with? What things do you like to do with your friends? Who helps you if you have a problem?)					
How would rank yourself on the following statements...					
* A.	I build positive friendships with other people.	1	2	3	4
* B.	I resolve conflicts without anyone getting hurt.	1	2	3	4
C.	I have someone in my life to help with daily chores if I am sick.	1	2	3	4
D.	I have someone in my life to do something enjoyable with.	1	2	3	4
* E.	I have friends who set good examples for me.	1	2	3	4
				Total	/20

2. Parent-child attachment					
Tell me about your relationship with your parent/s/child (probes: What do you do with your parent/s/child? How do you find talking with your parent/s/child?)					
How would rank yourself on the following statements...					
*	A. I spend time with my child when we do things together in a way that s/he enjoys.	1	2	3	4
*	B. I give love and support to my child.	1	2	3	4
*	C. I am good at talking to my child about things that matter.	1	2	3	4
*	D. I know where my child is and what s/he is doing.	1	2	3	4
	E. My child is comfortable sharing her/his thoughts and feelings with me.	1	2	3	4
				Total	/20
3. Community Belonging					
Tell me about your community? (Probes: Who are your neighbours? What groups in your community are you part of? What do your neighbours ask you and your friends to help with?)					
How would rank yourself on the following statements...					
*	A. I have good neighbours who care about me.	1	2	3	4
*	B. I am helping to make my community a better place.	1	2	3	4
*	C. I am involved in a church or mosque, or other community groups.	1	2	3	4
*	D. My community includes me and gives me useful roles and responsibilities.	1	2	3	4
*	E. I think it is important to help other people in my community.	1	2	3	4
				Total	/20
4. Emotional wellbeing					
Tell me about how you feel about yourself (How would you describe yourself? What do you see in your future?)					
How would rank yourself on the following statements...					
*	A. I feel good about myself.	1	2	3	4
*	B. I feel valued and appreciated by others.	1	2	3	4
*	C. I feel good about my future.	1	2	3	4
*	D. I find positive ways to deal with things that are hard in my life.	1	2	3	4
*	E. I feel in control of my life and future.	1	2	3	4
				Total	/20
5. Care and protection					
Tell me about how you feel about ensuring your child's safety and wellbeing (Probes: How safe do you feel your child? Do you have any worries about your child's safety? Has your child been hurt and, if so, how?)					
How would rank yourself on the following statements...					
*	A. I have confidence that my child can say no to things that are dangerous or unhealthy.	1	2	3	4
*	B. I create a safe environment for my child at home.	1	2	3	4
	C. I am able to talk with my child whenever he/she makes mistakes.	1	2	3	4
	D. I have positive ways to deal with my child's difficult behaviour.	1	2	3	4
*	E. I try to make sure my neighbourhood is safe for my child.	1	2	3	4
				Total	/20

FARE Integration Status star and action plan - Caregiver

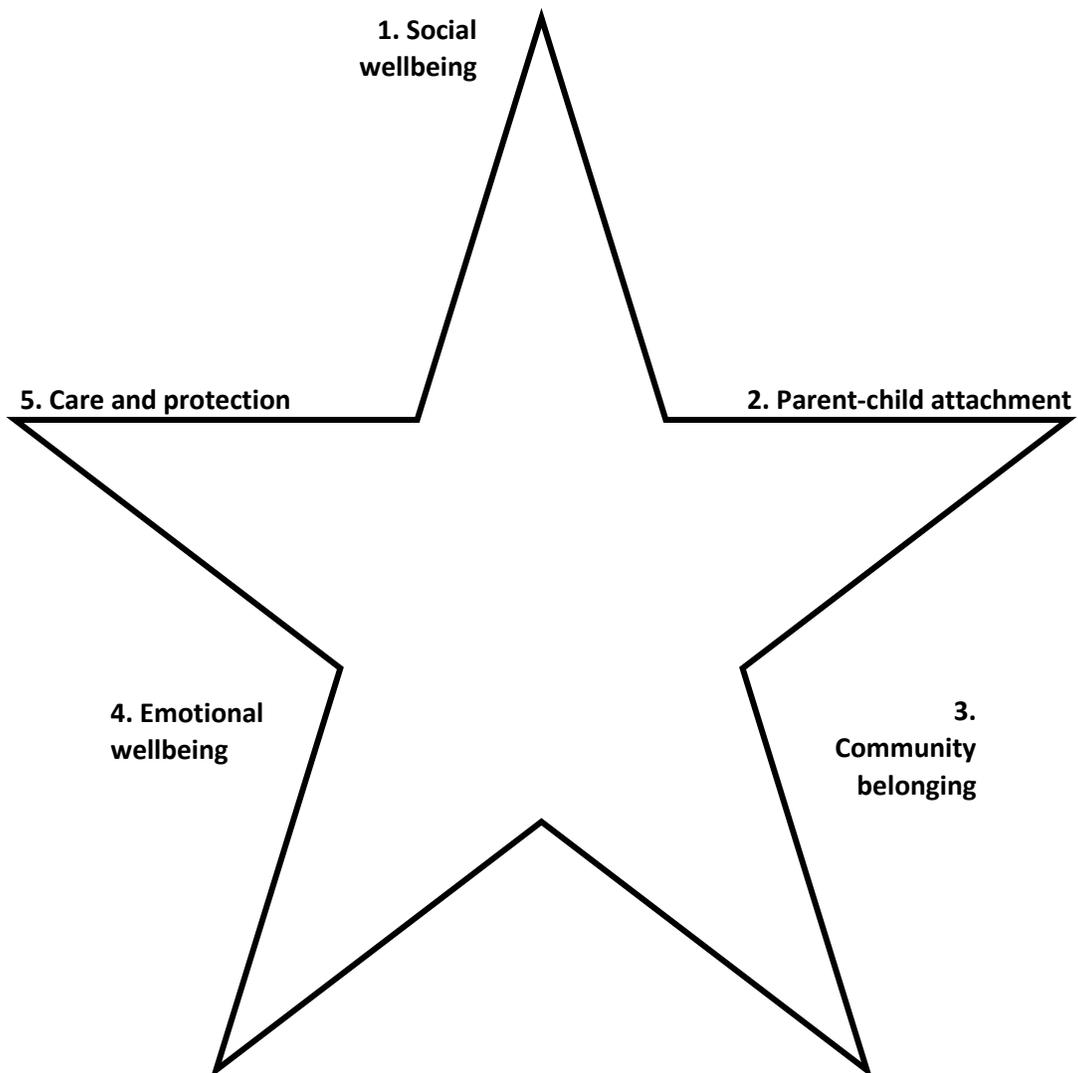
Caregiver's ID	Caregiver's name
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Plot all the scores on the relevant points of the star and join together with line. Check with the child that this represents how they are feeling about being back at home at the moment.

Use a different colour pen to mark points and lines for different dates. This will aid comparison over time.

Date 1:	Colour 1:
Date 2:	Colour 2:

Date 3:	Colour 3:
Date 4:	Colour 4:



Use the results and discussions about the star to build an action plan together.

Date 1:	Social worker's name:
<p>What are the key concerns? What areas have changed or stayed the same? Referring to your notes above and in discussion with the caregiver about the star note down the key progresses and concerns. In particular consider any scores of below 9 on the star above.</p>	
<p>Action plan In discussion with the child make suggestions for future actions to address any outstanding issues. These could be actions by child, caregiver and project, or need for referral.</p>	
Date 2:	Social worker's name:
<p>What are the key concerns? What areas have changed or stayed the same? Referring to your notes above and in discussion with the caregiver about the star note down the key progresses and concerns. In particular consider any scores of below 9 on the star above.</p>	
<p>Action plan In discussion with the child make suggestions for future actions to address any outstanding issues. These could be actions by child, caregiver and project, or need for referral.</p>	
Date 3:	Social worker's name:
<p>What are the key concerns? What areas have changed or stayed the same? Referring to your notes above and in discussion with the caregiver about the star note down the key progresses and concerns. In particular consider any scores of below 9 on the star above.</p>	
<p>Action plan In discussion with the child make suggestions for future actions to address any outstanding issues. These could be actions by child, caregiver and project, or need for referral.</p>	
Date 4:	Social worker's name:
<p>What are the key concerns? What areas have changed or stayed the same? Referring to your notes above and in discussion with the caregiver about the star note down the key progresses and concerns. In particular consider any scores of below 9 on the star above.</p>	
<p>Action plan In discussion with the child make suggestions for future actions to address any outstanding issues. These could be actions by child, caregiver and project, or need for referral.</p>	

Annex VI. Data for Other ES sub-group of FARE at-risk sample

		Other ES	
		Base	End
		(n=6)	(n=6)
HH Characteristics			
Head of Household Age	Median	35	36
	Range	32-52	34-54
# of children in HH		4.5	4.3
# of children in school		3.2	3.3
# of orphans		1.2	1.5
# of children disabled		0.2	0
# of children immunized		4.5	4.3
# of children HIV+		0	0
Economic classification			
Destitute		16.7	0
Struggling to make ends meet		83.3	33.3
Prepared to grow		0	66.7
Not vulnerable		0	0
Poverty rate (%) at poverty threshold of:			
<\$2.00/day PPP		46.2	51.4
<\$2.50/day PPP		59.1	66.4
<\$4.00/day PPP		80.6	86.1
CPA 1 average total score (0-28, higher = more vulnerable)		18.8	11.2
6a. Main source of HH income (%)			
<i>(least risky)</i> Formal business/job or employment		0	0
Petty business		50	33.3
Casual laborer/Informal job/ Peasantry farming		50	66.7
Remittance, pension, gratuity, donations		0	0
None <i>(most risky)</i>		0	0
HH Median Monthly Income (UGX)		50,000	200,000
Less than 50,000		33.3	0
50,000-100,000		66.7	0
100,000-150,000		0	0
150,000-200,000		0	33.3
Above 200,000		0	66.7
Avg number of months (of past 3) HH able to pay for:			
Food, shelter		1.5	3
Health care		1.3	3
Education		1.3	2.8

	Other ES	
	Base	End
	(n=6)	(n=6)
Score		
9	16.7	83.3
8	16.7	16.7
7	0	0
3-4	0	0
0-3	66.7	0
Strategies for handling economic shocks Highest scored* response (% selected)		
(low risk)		
0	16.7	0
1	0	16.7
2	0	50
3	16.7	0
4 (high risk)	66.7	33.3
Average total score for CPA 2		
(0-12, higher = more vulnerable)	4.5	1.7
# of meals per day in HH (%)		
3 + meals	0	33.3
2 meals	16.7	66.7
One meal	83.3	0
Some days no meal	0	0
Average CPA 3 score (0-12, higher=more vulnerable)	10.8	5
No stable shelter	16.7	16.7
Shelter needs major repairs	33.3	0
Shelter fairly adequate, safe	0	50
Shelter is safe, adequate	50	33.3
Hygiene/ sanitation conditions scores** (%)		
4	50	0
3	33.3	33.3
2	16.7	33.3
1	0	33.3
0	0	0
Average CPA 4 total score (out of 12; 12=no children in school, 0=all children in school)	7.2	2

	Other ES	
	Base	End
	(n=6)	(n=6)
HH children school attendance (%)		
No children attend regularly	16.7	0
Less than 50% attend school regularly	50	0
50% or more attend school regularly	16.7	50
All attend school regularly	16.7	16.7
Children aged under 5 only	0	33.3
Average score for CPA 5, 0-20 (higher = more vulnerability)	12.7	3.2
# of people respondent can approach for emotional support		
Nobody	33.3	0
1 person	66.7	16.7
2 people	0	83.3
3 or more people	0	0
# of people respondent can approach for material support		
Nobody	50	0
1 person	50	16.7
2 people	0	66.7
3 or more people	0	16.7
Have child(ren) not living with HH at some point in past 6 months (% selected)	83.3	50
Reason for children not living with HH (% selected)		
Child went to work/for a job, ran or was chased away, or caregiver doesn't know where the child is	20	0
Child does not like staying in this house	20	0
Child is living with relative because family cannot support him	60	25
Child went to school	0	75
Caregiver(s) used method of discipline (%) †		
Punched, kicked or hit a child with any object	33.3	16.7
Withheld a meal to punish a child	16.7	16.7
Used abusive words/language toward the child	16.7	0
Abuse a child experienced in HH in the last 12 months (% selected; not mutually exclusive) †		
Repeated physical abuse	33.3	0
Involved in child labor	50	0
Sexually abused, defiled, raped, forced into sex	16.7	0
Stigmatized/discriminated due to illness, disability or otherwise	0	0

	Other ES	
	Base	End
	(n=6)	(n=6)
Neglected	66.7	0
Been in conflict with the law	16.7	0
Child abused alcohol or drugs	16.7	0
Witnessed regular adult abuse of alcohol or drugs	50	33.3